## P07000125389

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: CVC HOSPITALITY, INC.

Name of Corporation

DOCUMENT NUMBER: P07000125389

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Chris Kersey

Name of Contact Person

CVC Hospitality, Inc.

Firm/Company

330 East Crown Point Road

Address

Winter Garden, Florida 34787

City/State and Zip Code

c.kersey@cvchospitality.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chris Kersey

407 、929-4836

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	e provisions of sections 607.0502, 617.9 ange is submitted for a corporation or			S
	er to change its registered office or reg			
L. The name of	the corporation: CVC HOSPITA	LITY, INC.		
2. The principa	office address: 330 East Crown	n Point Road		
	Winter Garden,			
3. The mailing	address (if different): Same as #2	2	<u></u>	
4. Date of incor	poration/qualification: 11/20/200	7Document number: P070	00012538	9
5. The name an	d street address of the current registere artment of State: (If resigned, enter resigned	ed agent and registered office on file		
	Taniya Lall Jimenez			
	330 East Crown Point Roa	ad	[V] 24	3 3
	Winter Garden, Florida 34	787		7 2001
6. The name an (if changed):	d street address of the new registered a	gent (if changed) and /or registered	office C	
	Brian P. Kirwin			Ξ
	15 West Church Street, S			
	Orlando, Florida 32801	NOT acceptable		
The street addr	ress of its registered office and the stre I be identical.	eet address of the business office of	— its registered	agent,
	as authorized by resolution duly adop he boars, or the corporation has been			
	94	Christopher Kersey, V	PD	
I further agree performance of agent. Or, if the hereby confirm	the appointment as fegistered agent to comply with the provisions of all stomment as feditered agent to comply with the provisions of all stommy duties, and Lath familiar with and is document is being filed merely to repeat the corporation has been notified.	Printed or typed name and agree to act in this capacity, tathes relative to the proper and cod accept the obligation of my positive flect a change in the registered of	mplete	ed
	chalf of an entity:			
0 0	PITALITY, INC.			
	Typed or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*