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11 OCT 11 AM II: 21
SECRETARY OF STATE
TALL AHASSEE FLORID

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corpo	rations	•	
NAME OF CORPOR	ATION:	Hotel #1103, :	Inc
DOCUMENT NUMB	er: <u> P1\00</u>	0081180	
The enclosed Articles of	f Amendment and fee a	re submitted for filing.	
Please return all corresp	pondence concerning thi	is matter to the following:	•
	Rozali	a Turi Jame of Contact Person	
-	WH	otel #1103, Ir	nC -
		Firm/ Company	
C	io Almeia	Aue	
		Address	
	Coral Gal	ity/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	Jeff Papell E-mail address: (to be use	d for future annual report notification)	
For further information	concerning this matter,	please call:	
Jeff Po Name of Co	apell	at (305) 460 Area Code & Daytime Tele	- 8008 phone Number
Enclosed is a check for	the following amount n	nade payable to the Florida Departi	
□ \$35 Filing Fee [343.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Sec Division of Cor P.O. Box 6327	ction	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

\sim		f State) 11 OCT
(Name of Corporation as currently filed	with the Florida Dept. o	f State)
W Hotel # 1108.		11 OCT / AH/1:21
		SECRETARY S
(Document Number of Co		
Pursuant to the provisions of section 607.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this Florida Pr	ofit Corporation adopts the folkinging
A. If amending name, enter the new name of the corpo	oration:	•
Unit 1103, In		The new
name must be distinguishable and contain the word	"corporation," "compar	ny," or "incorporated" or the
abbreviation "Corp.," "Inc.," or Co.," or the designation	on "Corp," "Inc," or "C	o". A professional corporation
name must contain the word "chartered," "professional a	issociation," or the abbre	eviation "P.A.
B. Enter new principal office address, if applicable:	<u>NA</u>	
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ESS</u>)	
·	- desired to the	
C. Enter new mailing address if applicables		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA.	
D. If amending the registered agent and/or registered		, enter the name of the
new registered agent and/or the new registered offi		
Name of New Registered Agent:	NA	
	NA	
New Registered Office Address:	(Florida street address)	
1	· · ·	
GLIST TO THE STATE OF THE STATE	(Cirv)	, Florida (Zip Code)
	(City)	(Zip Coue)
New Registered Agent's Signature, if changing Registe	red Agent:	
I hereby accept the appointment as registered agent. I an	n jamiliar with and accep	i ine obligations of the position.
Signature o	f New Registered Agent, i	f changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
1			
+			
	iding or adding additional Articles, additional sheets, if necessary). (Be		
	1 1		
		The second of th	
			ļ
provisi	mendment provides for an exchangions for implementing the amendment applicable, indicate N/A)	e, reclassification, or cancellate the am	ntion of issued shares, endment itself:
	1		
	<u> </u>		

he date of each amendment	(s) adoption:	1ctober t	0, 2011
	(date of ado	ption is required)	
Effective date <u>if applicable</u> :	(no more than 90 days after an	nendment file date)	<u> </u>
	, , , , , , , , , , , , , , , , , , ,	,	•
doption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/werby the shareholders was/wer	e adopted by the shareholders. re sufficient for approval.	The number of votes	east for the amendment(s)
The amendment(s) was/wern must be separately provided	e approved by the shareholders If for each voting group entitled	through voting groups	. The following statement the amendment(s):
"The number of votes of	ast for the amendment(s) was/v	were sufficient for appr	roval
by			•
((voting group)	 _	
action was not required. The amendment(s) was/were action was not required.	e adopted by the incorporators	without shareholder ac	tion and shareholder
Dated	10-5-11		
selec	a director, president or other off ted, by an incorporator – if in the inted fiduciary by that fiduciary	he hands of a receiver,	fficers have not been trustee, or other court
	(Typed or printed r	ey Papel name of person signing	
	Citle officer signing	ent.	·