

P11000094128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

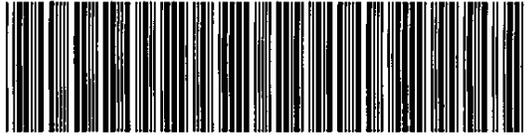
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA
15 APR 14 PM 2:12

CC 4/16

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Silver Hospitality, Inc
(Name of Corporation)

DOCUMENT NUMBER: P11000094128 / S-35935

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bhupendra Patel
(Name of Person)

Silver Hospitality Inc
(Name of Firm/Company)

734 Honeysuckle Avenue
(Address)

Kissimmee, FL 34747
(City/State and Zip Code)

For further information concerning this matter, please call:

Jack Goebel at (904) 565-9614
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

[Handwritten signature]
2/11/15

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION** 15 APR 14 PM 2:12

I, Nilesh Patel, effective 4/24/14, hereby resign as officer/director
(Title)

of Silver Hospitality, Inc.
(Name of Corporation)

S-35935 / P1660094128, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

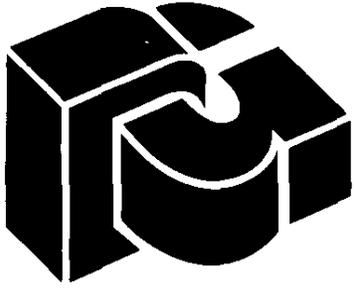


(Signature of resigning officer/director) 04/11/15

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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



April 10, 2015

**DOTTIE G.
DEVELOPMENT
CORPORATION**

Dept of State
Amendment Section
Div. of Corporation

RE: The Enclosed Request &
Payment \$35.00

To Whom it May Concern;

Please find within the above reference
and once processed, please e-mail
confirm to the attached business card
e-mail address(es) to confirm and validate
as enclosed as confirmed w/ our CPA.

We appreciate & thank you, PRELAWCORP@aol.com
Patel.Barry.Patel@aol.com

Jack Goebel

Baywood Center 1 • 9432 Baymeadows Road, Suite 100 • Jacksonville, Florida 32256

2811 S.W. 32nd Avenue Ocala, Florida 32674 • Ocala (904) 237-4400 • Jacksonville (904) 737-1400

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Barry Patel, MD, FACOG

Obstetrics • Gynecology
Infertility • Laser Surgery

March 24, 2015

Mr. Hemish Kapadia - CPA
Phyphar, Inc.
29 Walter Hammond Pl
Waldwick, NJ 07463

*RE: Silver Hospitality, Inc.
P11000094/28/2-35935*

Dear Mr. Kapadia:

Please produce the documents to clarify my equity and ownership position of Silver Hospitality, Inc. From the inception of the corporation, 100% of the equity contributions belong to me. In exchange for his management of the project, my brother Nilesh will own 10% of the corporation. Corporate by-laws or minutes should reflect that unless otherwise delegated through a management agreement, all authority and decisions regarding the company's operation vest with me.

In order to document my equity contributions to the company and my project to develop the Candlewood Suites Hotel NWC of I-75 & SR-40 in Ocala, Florida, please provide access to the company's books and records to Banks & Associates who is underwriting our loan request. Copies of the company's detail general ledger, check registers and invoice copies will help them establish my equity contributions necessary to obtain our loan commitment. I assume, with our accounting records and software, your response in providing this information is immediate and can be provided in pdf format for immediate delivery.

The corporate documents and equity documentation should be sent to:

Banks & Associates LLC
Attn: Brooksher L Banks CPA
40 Heritage Park Circle
North Little Rock, AR 72116
501-804-8410
Electronic delivery – BLBANKS@BANKS-ASSOC.COM

If the files you produce are too large, contact Mr. Banks and he will arrange for a secure cloud file transfer. I would appreciate you providing this information by this Friday, March 27, as this is one of the final pieces of information needed by the bank.

Respectfully,

Bhupendra Patel MD

Nandulaben Nilesh Patel

Health Care for Women and Expectant Mothers

207 Park Place Boulevard, Suites 2 & 3 • Kissimmee, Florida 34741 • (407) 870-5050 • FAX (407) 870-0137

014/11/15