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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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R. WHITE DEC 20 2011



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscglobal.com

Date: December 11, 2017

Order#: 949780/010

Re: HOSPITALITY FUNDING INC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Marissa Rather-lopez c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

		.0502, 617.0502, 607.1508, or 617.1508, Florida Sto poration organized under the laws of the State of		
		office or registered agent, or both, in the State of Flo		
1. The name of	the corporation: HOSPITA	LITY FUNDING INC		
2. The principa	office address: 9909 Equi	us Circle, Boynton Beach, Fl 33472		
3. The mailing	address (if different): PO B	lox 3169, Palm Beach, FL 33480		
4. Date of incorporation/qualification: 12/13/2013 Document number: P1300009			9494	
	d street address of the curre rtment of State: (If resigne	ent registered agent and registered office on file with d, enter resigned)	ı the	
	Silver, Laura L		70 d	
	9909 Equus Circle		LEST.	
	Boynton Beach	FL 33472	<u> </u>	
6. The name and (if changed);	PH 3: 45	1		
	Corporation Service Con	npany	意思	
	1201 Hays Street			
	Tollahanna	P.O. Box NOT acceptable FL 32301		
	Tallahassee	FL 32301		
The street address changed will	ess of its registered office be identical.	and the street address of the business office of its r	registered agent,	
Such change wanthorized by t	as authorized by resolution be board, or the corporation	n duly adopted by its board of directors or by an off on has been notified in writing of the change.	ficer so	
		Scott Silver Chairman & CEO		
Signati	ne of an officer or director	Printed or typed name and title		
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisi my duties, and I am famil	ered agent and agree to act in this capacity. Ons of all statutes relative to the proper and compliar with and accept the obligation of my position a merely to reflect a change in the registered office of been notified in writing of this change.	ete s registered address, I	
By: I Irac		12/11/2017		
Sig	nature of Registered Altern	Date		
If signing on be	half of an entity:			
	Asst. Vice President			
T	yped or Printed Name			

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