### I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 04/04/2024

SIGNATURE: BRYAN GUILLOT

Electronic Signature of Signing Authorized Person(s) Detail

Electronic Signature of Registered Agent

# Authorized Person(s) Detail :

Title	MANAGER	Title	AUTHORIZED MEMBER
Name	GUILLOT, BRYAN T	Name	GUILLOT, LINDA S
Address	7512 DR. PHILLIPS BLVD.	Address	7512 DR. PHILLIPS BLVD.
City-State-Zip:	SUITE 50 #133 FL 32819	City-State-Zip:	SUITE 50 #133 FL 32819
Title	AUTHORIZED MEMBER		
Name	GUILLOT, BRYAN JR THOMAS		
Address	7512 DR. PHILLIPS BLVD. SUITE 50 #133		
City-State-Zip:	ORLANDO FL 32819		

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

# Name and Address of Current Registered Agent:

**Current Principal Place of Business:** 

9966 KILGORE ROAD ORLANDO, FL 32836

### **Current Mailing Address:**

7512 DR. PHILLIPS BLVD. ORLANDO, FL 32819 US

### FEI Number: 68-0681128

SUITE 50 #133

GUILLOT, BRYAN 9966 KILGORE ROAD ORLANDO, FL 32836 US

SIGNATURE:

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L10000066113

Entity Name: THOMAS LEE GROUP HOSPITALITY LLC

FILED Apr 04, 2024 Secretary of State 0989937257CC

Certificate of Status Desired: Yes

Date

Date

MANAGER