

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000064788

Entity Name: EXLNT HOTLZ LLC**Current Principal Place of Business:**7825 UNIVERSAL BOULEVARD
ORLANDO, FL 32819**Current Mailing Address:**C/O GALVIN LAW, PL
390 NORTH ORANGE AVENUE SUITE 2300
ORLANDO, FL 32801 US**FEI Number:** 47-3716252**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GALVIN, MALCOLM P III ESQ
GALVIN LAW, PL
390 NORTH ORANGE AVENUE SUITE 2300
ORLANDO, FL 32801 US*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.***SIGNATURE:** JAMES J. FLICK

01/13/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	AUTHORIZED MEMBER
Name	JAFFER, MURTADHA
Address	C/O GALVIN LAW, PL 390 NORTH ORANGE AVENUE SUITE 2300
City-State-Zip:	ORLANDO FL 32801

Title	AUTHORIZED MEMBER
Name	JAFFER, MEHDI
Address	C/O GALVIN LAW, PL 390 NORTH ORANGE AVENUE SUITE 2300
City-State-Zip:	ORLANDO FL 32801

Title	AUTHORIZED MEMBER
Name	JAFFER, ZAHRA
Address	C/O GALVIN LAW, PL 390 NORTH ORANGE AVENUE SUITE 2300
City-State-Zip:	ORLANDO FL 32801

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.

SIGNATURE: MURTADHA JAFFER

AUTHORIZED MEMBER

01/13/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date