that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ST. PETE HOLDCO OWNER, LLC

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# M18000009784 Entity Name: BEACHCOMBER HOTEL OWNER, LLC

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

2700 TIGERTAIL AVE MIAMI, FL 33133

Current Mailing Address:

2700 TIGERTAIL AVE MIAMI. FL 33133 US

FEI Number: 83-2221859

Name and Address of Current Registered Agent:

BEZOLD, THOMAS 2700 TIGERTAIL AVE MIAMI, FL 33133 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.

SIGNATURI	: THOMAS BEZOLD			06/29/2020	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	VP	Title	AUTHORIZED MEMBER		
Name	LEVITT, JULIE	Name	ST. PETE HOLDCO OWNER, LL	C	
Address	2700 TIGERTAIL AVE	Address	2700 TIGERTAIL AVE		
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33133		

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

MEMBER

06/29/2020

FILED Jun 29, 2020 Secretary of State 6806896254CC

Certificate of Status Desired: No

Date