

P130000091045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Wilshire Hospitality
Name of Corporation

P13000091045
DOCUMENT NUMBER:

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adam Shindler
Name of Contact Person
Wilshire Hospitality
Firm/Company
230 SW 21st Rd
Address
Miami, FL 33129
City/State and Zip Code
adam.shindler@wilshirehospitality.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Shindler 312 239-0160
Name of Contact Person at () Area Code & Daytime Telephone Number

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

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

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

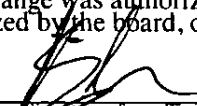
STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Wilshire Hospitality, Inc.
2. The principal office address: 2305 Edgewater Drive Ste 1610
Orlando, FL 32804
3. The mailing address (if different): same
4. Date of incorporation/qualification: 11/7/2013 Document number: P13000091045
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Michael Shindler
2305 Edgewater Drive Ste 1610
Orlando, FL 32804
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
230 SW 21st Rd
Miami, FL 33129
P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

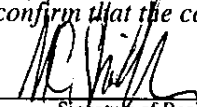


Signature of an officer or director

Adam Shindler // President

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

9/28/16

Date

If signing on behalf of an entity:

Typed or Printed Name

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