

**REGISTERED AGENT
STATEMENT OF APPOINTMENT**
(Section 106.022, F.S.)

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CITY OF MIAMI BEACH
OFFICE OF THE CITY CLERK

- Original Appointment Change of Appointment
 Change of Mailing Address Change of Physical Address

Registered Agent and Office Information

Name Jon Sleeper		Telephone 305-495-7649
Street Address 407 Lincoln Road #12H		
City Miami Beach	State FL	Zip Code 33139
Mailing Address Same		
City	State	Zip Code

I accept this appointment and confirm that I am familiar with and accept the obligations of the position as set forth in Section 106.022, F.S. I also understand that I may resign this appointment by executing a written statement of resignation and filing it with the applicable filing officer.



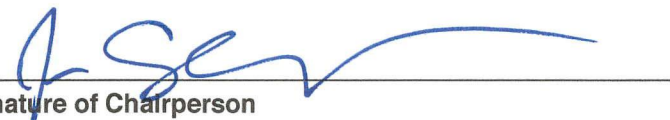
Signature of Registered Agent October 25, 2017
Date

Former Registered Agent and Office Information (for changes only)

Name		Telephone
Street Address		
City	State	Zip Code

Committee or Organization Information

Name of Committee or Organization South Beach Hotel and Restaurant Association, Inc.		
Street Address 407 Lincoln Road #12H		Telephone 305-673-0440
City Miami Beach	State FL	Zip Code 33139



Signature of Chairperson

Jon Sleeper
Printed Name of Chairperson October 25, 2017
Date