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Florida Department of State  
Division of Corporations  
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(((H06000015896 3)))

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To: Division of Corporations  
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From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
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FLORIDA/FOREIGN LP/LLP

Westin Hotel Management, L.P.

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DIVISION OF CORPORATIONS

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*BO4-68 al*



January 31, 2006

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: WESTIN HOTEL MANAGEMENT, L.P.  
REF: W06000004657

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability partnership must have an active registration/filing on file with this office before this filing will be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Document Specialist

FAX And. #: E06000015896  
Letter Number: S06A00006903

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP  
TO TRANSACT BUSINESS IN FLORIDA**

1. WESTIN HOTEL MANAGEMENT, L.P.

*(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.  
or LLLP.*

*(If name unavailable, name under which the limited partnership or limited liability limited partnership  
proposes to register to transact business in Florida; must contain acceptable suffix.)*

2. Delaware 3. 1/5/06  
(State or Country of Formation) (Date of Formation)

4. CT Corporation System  
(Name of Registered Agent for Service of Process)

5. 1200 South Pine Island Road, Plantation, Florida 33324  
(Florida street address for Registered Agent)

6. *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 obligations of my position as registered agent.*

CT Corporation System  
By: George Bryan **GEORGE BRYAN**  
Signature of Registered Agent **SPECIAL ASSISTANT SECRETARY**

7. 1111 Westchester Avenue  
(Principal office address)

White Plains, NY 10604

8. If limited partnership is a limited liability limited partnership, check box

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TALLAHASSEE, FLORIDA

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9. 1111 Westchester Avenue  
(Mailing address)  
White Plains, NY 10604

10. Name, principal office address, and mailing address of each general partner:

Starwood Hotels & Resorts Worldwide, Inc.  
(Name) *P12438*  
1111 Westchester Avenue  
(Street Address)  
White Plains, NY 10604  
(Mailing Address)

Starwood Hotels & Resorts Management  
(Name) *Company, Inc.*  
*FO6-765*  
1111 Westchester Avenue  
(Street Address)  
White Plains, NY 10604  
(Mailing Address)

\_\_\_\_\_  
(Name) \_\_\_\_\_  
(Street Address) \_\_\_\_\_  
(Mailing Address) \_\_\_\_\_

\_\_\_\_\_  
(Name) \_\_\_\_\_  
(Street Address) \_\_\_\_\_  
(Mailing Address) \_\_\_\_\_

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(Name)	(Street Address)
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_____	(Mailing Address)

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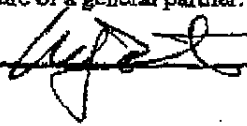
11. Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 17<sup>th</sup> day of January, 2006

Signature of a general partner:



Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

# Delaware

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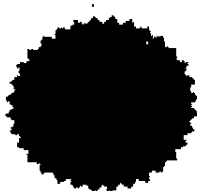
*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WESTIN HOTEL MANAGEMENT, L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JANUARY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

SECRETARY OF STATE  
DELAWARE  
JAN 13 2006  
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*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 4457356

DATE: 01-19-06