Division of Corporations

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: GRONEK & LATHAM, LLP

Phone

Account Number : I20000000025 : (407)481-5800

Fax Number (407) 481-5801

MITED LIABILITY COMPANY

Universal Studios Hotel LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

04/11/2002 14:11 FAX 213 687 3702

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

N COMPLIABILITY COMPA	CTION 608.503, FLORIDA STA INI TO TRANSACT BUSINESS	NTHE STATE OF 1 3002			
Universal Studios Hotel	LLC (Name of fo	reign limited liability comp	eny)		
2. Delaware	iw of which foreign limited lis	3 	ed For El number, if applicable)	
COMPany or p. P.		5. Perpenial	ar limited liability compa	ny will cease to	
-	Organization)	wast or herba	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
6	April 30, 2002	ida. (See sections 608.501,	608.502, and 817.155, P.	.3.)	
(Date f	irst transacted occurred City Plaz	a, Universal City, CA 9160	8	OR APP	-
		•		<u> </u>	-11
Attn: Corporate Sec		address of principal office			
8. If limited liability	, company is a manager-n	nanaged company, cae	pers are as follows:	FL0:	Ū
9. The usual busine	ss addrisses of the manag	ing memoers of manag		35 RIDA	
USI Entertainment	, Inc.		·:		
100 Universal City	Plaza				
Universal City, C	91608			·	
Universal City, CA	lammetaTV			Sharing arstaty0	—- Frecords in
Universal City, CA Attn: Corporate S 10. Attached is an orig	inal certificate of existence, no t	note than 90 days old, duly a (A photocopy is not accepted	ornericated by the officia size If the certificate is in a	l having custoriy o forcign languages,	frecords in a
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Typed or primed name of signee

1. The name of the Limited Liability Company is:

(Signature)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

2. The name	Universal Studios Hotel LLC and the Florida street address of the registered agent and office are:
	CT Corporation System (Name)
	1209 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE)
	Plantation, FL 33324
	(City/State/Zip)
iability comp e egistered age thtutes relati	named as registered agent and to accept service of process for the above stated limited any at the place designated in this certificate, I hereby accept the appointment as ent and agree to act in this capacity. I further agree to comply with the provisions of any to the proper and complete performance of my duties, and I am familiar with and igations of my position as registered agent as provided for in Chapter 608, F.S. PETER F. SOUZA

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, MARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "UNIVERSAL STUDIOS HOTEL LLC" 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 TWENTY-NINTH DAY OF APRIL, A.D. 2002.

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



3514329 8300

020272027

Darriet Smith Windson

AUTHENTICATION: 1748711

DATE: 04-29-02