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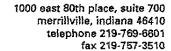
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Special Instruc	ctions to Filing Officer:
	Office Use Only



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FILED
2003 JUL 14 PH 12: 27
2003 JUL 14 PH 12: 27
2003 JUL 14 PH 12: 27





WHITEC @ Industries , Inc.

July 11, 2003

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Miracourt, LLC Mirares, LLC

Enclosed, in duplicate each on behalf of Miracourt, LLC, an Indiana limited liability company, and Mirares, LLC, an Indiana limited liability company, is a completed Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida and a Certificate of Designation of Registered Agent/Registered Office. In addition, enclosed is a check in the amount of \$125 for each of the applications and designations in payment of associated filing fees. If in order and acceptable, please enter the originals of record and return a file marked application and designation to me. Upon your review of the enclosures and further consideration of this matter, please feel free to contact me if any additional information could be supplied by our office. As always, your attention to and cooperation in these matters are greatly appreciated.

Very truly yours.

Carol Ann Bowman Corporate Secretary and

General Counsel

CAB/pd Enclosure(s) 3818:3819:513:071103

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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:

1	Mi	cares, LLC
		(Name of foreign limited liability company)
	Υ	and the second s
'. ''(	Juriso	liana liction under the law of which foreign limited liability company is organized)  3.  (FEI number, if applicable)
	Ju	ne 3, 2003 5, perpetual
ŧ.		(Name of foreign limited liability company)  diana liction under the law of which foreign limited liability company is organized)  ne 3, 2003  (Date of Organization)
5.	Upo	on filing of this application
		(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7.	100	00 East 80th Place, Suite 700 North
	Mer	rillville, Indiana 46410
		(Street address of principal office)
3.	If li	nited liability company is a manager-managed company, check here 🗓
9.	The	name and usual business addresses of the managing members or managers are as follows:
	W	nite Lodging Services Corporation
	100	0 East 80th Place, Suite 600 North
	] ler	rillville, Indiana 46410
10.	the j	ched is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in urisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)
11.	. Na	ture of business or purposes to be conducted or promoted in Florida: To conduct any and all
	law	ful business and activities for which limited liability companies may be
	aut	horized to transact business in Florida.
		Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
		Mirares, LLC
		Typed or printed name of signee White Lodging Services Corporation, Manager Carol Ann Bowman, Assistant Secretary

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 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.

1.	The name of the Limited Liability Company is:
	Mirares, LLC
2.	The name and the Florida street address of the registered agent and office are:
	C T Corporation System
	(Name)
	c/o C T Corporation System, 1200 South Pine Island Road
	Florida street address (P.O. Box NOT ACCEPTABLE)
	Plantation, FL 33324
	(City/State/Zip)
liai reg sta	ving been named as registered agent and to accept service of process for the above stated limited bility company at the place designated in this certificate, I hereby accept the appointment as istered agent and agree to act in this capacity. I further agree to comply with the provisions of all this relating to the proper and complete performance of my duties, and I am familiar with and ept the obligations of my position as registered agent as provided for in Chapter 608, F.S.
Ву	Jeffrey R. Graves  Assistant Secretary  (Signature)

Filing Fee for Application

Certified Copy (optional)

Designation of Registered Agent

Certificate of Status (optional)

\$ 100.00

\$ 25.00 \$ 30.00

\$ 5.00

### STATE OF INDIANA OFFICE OF THE SECRETARY OF STATE CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greetings:

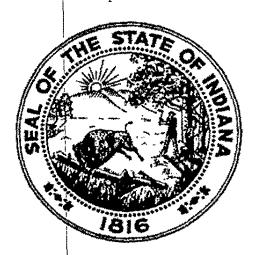
ABSUL WASSERS AND STREET I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

#### MIRARES, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on June 03, 2003, and was in existence or authorized to transact business in the State of Indiana on July 09, 2003.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Ninth Day of July, 2003.

TODD ROKITA, Secretary of State

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