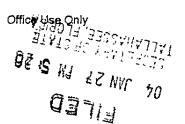
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| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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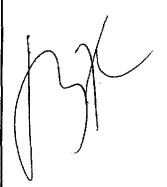


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OF JAN 288 FLOWING SECRET ALOWING THE STORY OF THE STORY



ACCOUNT NO.: 0721000000032

REFERENCE: 408627 4379532

AUTHORIZATION: Toticus light

COST LIMIT: \$ 125.00

ORDER DATE: January 23, 2004

ORDER TIME: 2:27 PM

ORDER NO.: 408627-010

CUSTOMER NO: 4379532

CUSTOMER: Jack Hudson

Hewitt & O'neil Llp

Suite 1050
19900 Macarthur Boulevard

Irvine, CA 92612

FOREIGN FILINGS

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

NAME: KMSB, LLC

XX PLAIN STAMPED COPY

CONTACT PERSON: Kimberly Moret -- EXT# 2949

EXAMINER:

### 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 AFOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:   |  |  |  |  |
|---|--|--|--|--|
| 1. KMSB, LLC  |  |  |  |  |
| (Name of foreign limited liability company)   |  |  |  |  |
| 2. Delaware 3. Applied For  |  |  |  |  |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)  |  |  |  |  |
| 4. 1/23/04 5. March 31, 2050 ~ ?  |  |  |  |  |
| (Date of Organization) (Duration: Year limited liability confinency will cease to exist or "perpetual")   |  |  |  |  |
| 6. Upon Filing  |  |  |  |  |
| (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)  7. 4100 MacArthur Blvd., Suite 200  |  |  |  |  |
| Newport Beach, CA 92660   |  |  |  |  |
| (Street address of principal office)  |  |  |  |  |
| 8. If limited 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:  |  |  |  |  |
| A. Makar Properties, LLC B. Kimpton Hotel & Restaurant Group, LLC   |  |  |  |  |
| 4100 MacArthur Blvd., Suite 200 222 Kearney Street, Suite 200 Newport Beach, CA 92660 San Francisco, CA 94108   |  |  |  |  |
| Attn: Samuel H. Weissbard Attn: Joesph D. Long  |  |  |  |  |
| Executive Vice President Executive Vice President   |  |  |  |  |
| and General Counsel   |  |  |  |  |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) |  |  |  |  |
| 11. Nature of business or purposes to be conducted or promoted in Florida: Acquisition and Development  |  |  |  |  |
| of real estate.   |  |  |  |  |
| John D. Hudson  |  |  |  |  |
| 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.)  |  |  |  |  |
| John D. Hudson  |  |  |  |  |
| Typed or printed name of signee   |  |  |  |  |

### 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 | f the Limited Liability Company is:                                   |
|----|-------------|---|
|    | KMSB,       | LLC   |
| 2. | The name as | nd the Florida street address of the registered agent and office are: |
|    |             | Corporation Service Company   |
|    |             | (Name)  |
|    |             | 1201 Hays Street  |
|    |             | Florida street address (P.O. Box NOT ACCEPTABLE)                      |
|    |             | Tallahassee FL 32301  |
|    |             | (City/State/2ip)  |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Cynthia L. Harris
as its agent
(Signature)

\$ 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, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KMSB, 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-THIRD DAY OF JANUARY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KMSB, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JANUARY, A.D. 2004.

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



Warriet Smith Hindson
Harriet Smith Windson, Secretary of State

AUTHENTICATION: 2889632

DATE: 01-23-04

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