Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170001232783)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA0000000023

Phone

: (512)418-6949

Fax Number

: (954)208-0845

*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Emai:	1 Add	ress	:_
-------	-------	------	----

Foreign Limited Liability Company Hotel 8629 International GP, L.L.C.

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

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 05 2017

Y SULKER

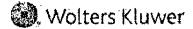
To:

ТО		
COMPANY		
FAXNUMBER	18506176383	
FROM	Ranae McGraw	
DATE	2017-05-04 13:55:58 CST	
RE	Hotel 8629 International GP, L.L.C.	•

COVER MESSAGE

Kaity Toon Fulfillment Specialist Fulfillment Operations CT Corporation

Team (614) 280-3338 GlobalFulfillmentTeam@wolterskluwer.com



4400 Easton Commons Way Suite 125 Columbus, Ohio 43219 www.wolterskluwer.com

Confidentiality notice: This small and its attachments (if any) contain confidential information of the sender. The information is intended only for the use by the direct addressess of the original sender of this email. If you are not an intended recipient of the original sender (or responsible for delivering the message to such observe), you are hereby notified that any review, disclosure, conving, distribution of the taking of any action in reliance of the contents of and attachments to this email is strictly prohibited. If you have received in its email in error, please immediately notify the sender at the address shown beroin and permanently delete any copies of this email (digital or paper) in your possession.

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

	CTION 605.0902, FLORIDA STATUTES, THE FOL USINESS IN THE STATE OF FLORIDA:	LOWING IS SUBMITTED TO REGISTER λ F	ORFIGN LIMITEI	D <i>IJABILITY</i>
1. Hotel 8629 Internation				
(Name of For	eign Limited Liability Company; must include "	Limited Liability Company," "L.L.C.," or "	LLC.")	-
(If name unavailable, enter a Liability Company," "L.L.C.	Iternate name adopted for the purpose of transact " or "LLC.")	ting business in Florida. The alternate name	e must include "Li	 mited
2. Delaware	3.			
company is organized)	of which foreign limited liability	(PEI number, if applicable)		
4.	(Date first transacted business in Florid (See sections 605.0904 & 605.0905, F.S.	a, if prior to registration.)		
5. 1601 Washington Ave	(See sections 605.0904 & 605.0905, F.S. mue, Suite 800	to determine penalty liability)		
Miami Beach, FL 331	39 [·]	•		
	(Street Address of Principal O	•	٠	
6			٠,	17,
	(Mailing Address)			-A.
7. Name and street address	is of Florida registered agent: (P.O. Box N	OT accentable)	Salah Mari	1 .
Name:	GT Corporation System	<u>D1</u> acceptable)		> >.
Office Address:	1200 South Pine Island Road	· · · · · · · · · · · · · · · · · · ·	99	P
	Plantation	, Florida <u>33324</u>	(A)	∄
Registered agent's accep	(City)	(Zip code)		
Having been named as re designated in this applica to complywith the provision accept the obligations of t	gistered agent and to accept service of protion, I hereby accept the appointment as recons of all statutes relative to the proper any position as registered agent. CT Corporation System	existered agent and acres to act in this	capacity. I furi and I am famili	ther garee
	(Registered agent'	s signature)	-cui y	
8. The name, title or capa Ruby Huang	icity und address of the person(s) who has/h	lave authority to manage is/are:		
Authorized Signatory				
				
591 West Putnam Avenue	, Greenwich, C1 08830			
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old, dul of which it is organized. (If the certificators abmitted)	y authenticated by the official having c Lip a foreign language a pensiation of	ustody of records the certificate un	s in the ider oath
	Signature of an author	/		•
This document is executed submitted in a document to	in accordance with section 605,0203 (1) (b the Department of State constitutes a third), Florida Statutes. I am aware that any degree felony as provided for in s.817.	false information 155, P.S.	ì
	Ruby Huang			
	Typed or printed name	or signee		



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HOTEL 8629 INTERNATIONAL GP, L.L.C."

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 FOURTH DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

ď.

6400217 8300 58# 2017309138

SR# 20173091286
You may verify this certificate online at corp.delaware.gov/authver.shtml

Jant's W. Bluffock, Secretary of Shite

Authentication: 202486981

Date: 05-04-17