2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000001056

Entity Name: FELCOR/CSS (SPE), L.L.C.

Current Principal Place of Business:

545 E. JOHN CARPENTER FWY., SUITE 1300

IRVING. TX 75062

Current Mailing Address:

545 E. JOHN CARPENTER FWY., SUITE 1300

IRVING, TX 75062

FEI Number: 75-2544994 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MGR

Name SMITH, RICHARD A Name HUGHES, MICHAEL C

Address 545 E. JOHN CARPENTER FWY., Address 545 E. JOHN CARPENTER FWY.,

SUITE 1300 SUITE 1300

City-State-Zip: IRVING TX 75062 City-State-Zip: IRVING TX 75062

Title MGR Title OFFICER

Name YELLEN, JONATHAN H Name MUNDY, LARRY J

Address 545 E. JOHN CARPENTER FWY., Address 545 E. JOHN CARPENTER FWY.,

SUITE 1300 SUITE 1300

City-State-Zip: IRVING TX 75062 City-State-Zip: IRVING TX 75062

Title OFFICER Title OFFICER

Name NYE, CHARLES N Name GREEN, BIANCA S

Address 545 E. JOHN CARPENTER FWY., Address 545 E. JOHN CARPENTER FWY.,

SUITE 1300 SUITE 1300

City-State-Zip: IRVING TX 75062 City-State-Zip: IRVING TX 75062

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JONATHAN H. YELLEN

MGR

01/13/2014

FILED Jan 13, 2014

Secretary of State

CC4322775270

Date