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B. KOHR

FEB - 5 2010

**EXAMINER** 



ACCOUNT NO. : I2000000195

REFERENCE : 273633

7481856

AUTHORIZATION :

COST LIMIT : \$ 1000-00

ORDER DATE : February 3, 2010

\*\*PLEASE FILE 2ND\*\*\*

ORDER TIME : 9:45 AM

ORDER NO. : 273633-185

CUSTOMER NO: 7481856

#### FOREIGN FILINGS

NAME: HMC HOTEL DEVELOPMENT LP

XXXX QUALIFICATION (TYPE: LP)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY

XX PLAIN STAMPED COPY

\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER:

#### APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

1. HMC Hotel Development LP
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.
(If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.)
2. Delaware 3. November 10, 1998
(State or Country of Formation) (Date of Formation)
4. Corporation Service Company
(Name of Registered Agent for Service of Process)
5.1201 Hays Street
(Florida street address for Registered Agent)
Tallahassee, FL 32301
6. 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 relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.
Corporation Service Company
By: Mi Chelle R. Vanhon
Signature of Registered Agent
7. 6903 Rockledge Drive, Suite 1500
(Principal office address)
Bethesda, Maryland 20817
8. If limited partnership is a limited liability limited partnership, check box

Page 1 of 3

9. 6903 Rockledge Drive, Suite 1500	,
(Maili	ng address)
Bethesda, Maryland 20817	
10. Name, principal office address, and ma	ailing address of each general partner:
Host Tampa GP LLC	6903 Rockledge Drive
(Name) M 100000552	Bethesda, Maryland 20817
	6903 Rockledge Drive
	Bethesda, Maryland 20817
(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)

Page 2 of 3

(Name)	(Street Address)
(Name)	(Sireet Address)
	(Mailing Address)
(Name)	(Street Address)
	(Mailing Address)
11. Effective date, if other than the date of	filing:
(Effective date cannot be prior to no filed by the Florida Department of .	or more than 90 days after the date this document is State.)
to the delivery of this application to	tence duly authenticated, not more than 90 days prior the Florida Department of State, by the Secretary of dy of the entity's records in the jurisdiction under the
Signed this day	of February ,20 10
Signature of a general partner:	
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

## Delaware

PACE 1

### The First State

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

DELAWARE, DO HEREBY CERTIFY "HMC HOTEL DEVELOPMENT LP" 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 FEBRUARY, A.D. 2010.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HMC HOTEL DEVELOPMENT LP" WAS FORMED ON THE TENTH DAY OF NOVEMBER, A.D. 1998.

2965180 8300

100109625

Jeffrey W. Bullock, Secretary of Sta AUTHENTYCATION: 7798769

DATE: 02-04-10

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