## Division of Corporation Division of Corporations Electronic Filing Cover Sheet

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.

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : 12000000195 : (850)521-1000 : (850)558-1515 Phone Fax Number

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

Email Address:\_\_

FLORIDA/FOREIGN LP/LLLP ASHFORD WQ HOTEL LP

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$1,061.25

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EXAMINER

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#### COVER LETTER

Fax Server

TO: Registration Section Division of Corporations				
SUBJECT: Ashford WQ Hotel LP				
Name of Foreign Limited Partn	ership or Limited Liability	Limited Partnership		
The enclosed application, certificate of status and fee partnership to transact business in Florida.  Please return all correspondence concerning this mat		a foreign limited partnership	or limited liability limi	ted
Ruth Shumway				
Contact Person	·			
Ashford Hospitality Trust, Inc.				
Firm/Company				
14185 Dallas Parkway, Suite 1100				
Address	<del></del>			
Dallas, Texas 75254				
City, State and Zip Code				
rshumway@ahtreit.com				
E-mail address: (to be used for future annual repor	t notification)		7	
For further information concerning this matter, pleas	se call:			
Michael Lockwood	at (214 ) 659	-4540	THAR -	
Name of Contact Person		me Telephone Number	ेंड न	Colorado de la colorada del colorada del colorada de la colorada del colorada del colorada de la colorada del colorada d
Enclosed is a check for the following amount:				F. Martin 27
\$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)  \$1,008.75 Filing Fees and Certificate of Status	\$1,052.50 Filing Fees and Certified Copy	\$1,061.25 Filing Fee, Certified Copy, and Certificate of Status	AH 9442	The same
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314			

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

I. Ashford WQ Hotel LP	
Acceptable Limited Partnership suffixes: Limited Part	inbility Limited Partnership, which must include suffix) inership, Limited, L.P., LP, or Ltd. xes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
	artnership or limited liability limited partnership proposes to register to transact Torida; must contain acceptable suffix.
2. Delaware	3. February 28, 2011
State or Country of Formation	Date of Formation
4. Name of Registered Agent for Service of Process	and Florida Street Address:
Corporation Service Company	
1201 Hays Street	
Tallahassee, FL 32301	
5. I hereby accept the appointment as registered agent of all statutes relative to the proper and complete points position as registered agent.  Sig	rand agree to act in this capacity. I further agree to comply with the provisions efformance of my duties, and I am familiar with and accept the obligations of Kirnberly B. Moret as its agent.
7. Principle Office: (Florida Street Address)	8-Mailing Address:
N/A	14185 Dallas Parkway, Suite 1100
	Dallas, Texas 75254
9. If limited partnership is a limited liability limited	
10. Name, principal office address, and mailing add	iress of each general partner;
Name of General Partner: Ashford WQ Hotel GP,	LLC M Name of General Partner:
	ite 1100 Street Address:
Dallas, Texas 75254	
Mailing Address: 14185 Dallas Parkway, S	Suite 1100 Mailing Address:
Dallas, Texas 75254	
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:

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Name of General Partner;	Name of General Partner:
Street Address:	Street Address;
Mailing Address:	Mailing Address:
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after to	he date this document is filed by the Florida Department of State.)
12. Attached is a certificate of existence duly authenticated, not	t more than 90 days prior to the delivery of this application to the official having custody of the entity's records in the jurisdiction under
Signed this 28th day of February	, <sub>20_</sub> 11
David A. Brooks, 'The individual signing this document affirm that the facts stated submitted in a document to the Department of State constitutes	
Certified Copy (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

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# Delaware

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### The First State

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

DELAWARE, DO HEREBY CERTIFY "ASHFORD WQ HOTEL 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 TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASHFORD WO HOTEL LP" WAS FORMED ON THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2011.

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

2011 HAR -1 AN S 42
SECRETARY OF STATE
TALLARASSEE FISHIO.

4946163 8300

110231411

DATE: 02-28-11

AUTHENTYCATION: 8587369

Jeffrey W. Bullock, Secretary of State

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