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(Address)

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TO ACKNOWLEDGE
SUFFICIENCY OF FILING

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S. YOUNG

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VIA HAND DELIVERY

MEMORANDUM

TO: Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

FROM: Maggie M. Schultz

DATE: July 25, 2016

RE: Applications Submitted on behalf of Atrium Holding Company

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Enclosed are the following applications submitted on behalf of our client, Atrium Holding Company:

1) Amendment to Certificate of Authority for Foreign Limited Partnership or Limited Liability Limited Partnership / Atrium Check 3994 for $105 filing fee;

2) Application by Foreign Limited Partnership or Limited Liability Partnership to Transact Business in Florida / Atrium Check 3995 for $1052.50 filing fee;

3) Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida / Atrium Check 3996 for $155 filing fee.

In order to expedite this matter for our client, I would appreciate a call at 681-6788 if you have any questions or problems with these filings and also to pick up the confirmations of the filings when they are ready.

Thank you for your assistance.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Atrium Hospitality LP
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed application, certificate of status and fees are submitted to register a foreign limited partnership or limited liability limited partnership to transact business in Florida.
Please return all correspondence concerning this matter to:

Irina Tempel
Contact Person

Atrium Holding Company
Firm/Company

1114 Avenue of the Americas 38th FL
Address

New York, NY 10036
City, State and Zip Code

itempel@Atriumllc.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Irina Tempel at (212) 703-2690
Name of Contact Person — Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $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

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

1. Atrium Hospitality 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
State or Country of Formation

3. 2/17/2015
Date of Formation

4. **Federal Employer Identification Number:**

5. **Name of Registered Agent for Service of Process and Florida Street Address:**

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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 and accept the obligations of my position as registered agent.*

Chelsey Martine
Asst Vice President
Signature of Registered Agent

7. **Principal Office:**

2398 E. Camelback Road Suite 1000

Phoenix, AZ 85016

8. **Mailing Address:**

C/O Atrium Holding Company 1114 Avenue of the Americas, 38th FL

New York, NY 10036

9. **If limited partnership is a limited liability limited partnership,** check box .

10. **Name, principal office address, and mailing address of each general partner:**

Name of General Partner: Atrium Holding Company

Street Address: 2398 E. Camelback Road Suite 1000
Phoenix, AZ 85016

Mailing Address:

Name of General Partner:

Street Address:

Mailing Address:

Name of General Partner:

Street Address:

Mailing Address:

Name of General Partner:

Street Address:

Mailing Address:

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 the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 22 day of July ,2016.

_____
Signature of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Filing Fees:	**$1,000.00** ($965 Filing Fee and $35 Registered Agent Fee)
Certified Copy (optional):	**$52.50**
Certificate of Status (optional):	**$8.75**

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TALLAHASSEE, FLORIDA

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ATRIUM HOSPITALITY 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 FIFTEENTH DAY OF JULY, A.D. 2016.

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Jeffrey W. Bullock, Secretary of State

5693980 8300

SR# 20164940728

Authentication: 202669822

Date: 07-15-16

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