To: Page 2 of 5

3/15/2018

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sheet: H18090084806 3

from: Kimberly Laughrey

Division of Corporations **Electronic Filing Cover Sheet** 

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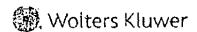
## **FAX COVER SHEET**

TO	
COMPANY	
FAXNUMBER	18506176383
FROM	Kimberly Laughrey
DATE	2018-03-15 13:24:53 CST
RE	Hotel 3315 Virginia Beach Opco, L.P.

## COVER MESSAGE

Shannon Ebright
Associate Fulfillment Specialist
CT Corporation

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



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

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i i

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

Hotel 3315 Virginia Beach Opco, L.P.	
Acceptable Limited Partnership suffixes: Limited	ted Liability Limited Partnership, which must include suffix) Partnership, Limited, L.P., L.P., or Ltd. suffixes: Limited Liability Limited Partnership, L.E.L.P. or LLLP.
	ed partnership or limited liability limited partnership proposes to register to transact in Florida; must contain acceptable suffix.
2 Delaware	3,3/1/18
State or Country of Formation	n Date of Formation
4. Federal Employer Identification Number: 82	<del>-4717278</del>
5. Name of Registered Agent for Service of Pro-	cess and Florida Street Address:
C T Corporation System	
1200 South Pine Island Road	<del></del>
Plantation, Florida 33324	- <del></del>
of all statutes relative to the proper and comple	agent and agree to act in this capacity. I further agree to comply with the provisions are performance of my duties, and I am familiar with and accept the obligations of Angel Shearer, Assistant Secretary  Signature of Registered Agent
7. Principal Office:	8. Mailing Address:
1601 Washington Avenue, Suite 800	
Miami Beach, FL 33139	
9. If limited partnership is a limited liability lin	
10. Name, principal office address, and mailing	g address of each general partner:
Name of General Partner: OPCO 40, 1446	Name of General Partner:
Street Address:	
Miami Beach, FL 33139	
Mailing Address:	Mailing Address:
Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
	••

Name of Ge	teral Purtner	Page 1 of 2 Name of General Partne	er:				
Mailing Add							
11. Effective da (Effective date co	te, if other than the date of filing:	***					
12. Attached is a Florida Departm the law of which		ted, not more than 90 days prior to the other official having custody of the e	e delivery of this application to the entity's records in the jurisdiction under				
Signed this 14th	day of March	.20 18					
The individual si submitted in a do	Si Hotel 33 I: gring this document affirm that the fact becoment to the Department of State con-	gnature of a general partner 5 Virginia Beach Opco GP, L.L.C. Is stated herein are true and the indivi- stitutes a third degree felony as provice	led for in s.817.155, F.S.				
	Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$52.50 \$8.75	S35 Registered Agent Fee)				
		Page 2 of 2					
		<u>.</u>	10: 25 1.68102				
		.w					

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOTEL 3315 VIRGINIA BEACH OPCO, L.P." 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 MARCH, A.D. 2018.

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

6777653 8300 SR# 20181936769 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202325369

Date: 03-15-18