

# FO00000005196

## TRANSMITTAL LETTER

To: Qualification/Tax Lien Section  
Division of Corporations

SUBJECT: Heritage Inn & Suites of Orlando, Inc.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Lori Kasowski

(Name of Person)

Tharaldson Development Co.

(Firm/Company)

1134 Westrac Drive

(Address)

Fargo, North Dakota 58103

(City/State/Zip)

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\*\*\*\*\*78.75 \*\*\*\*\*78.75

Should you need to call someone concerning this matter, please call:

Lori Kasowski

(Name of Person)

at ( 701 ) 235-1167

(Area Code & Daytime Telephone Number)

### STREET ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

### MAILING ADDRESS:

Qualification/Tax Lien Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy
- mtw  
9/18

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. Heritage Inn & Suites of Orlando, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. North Dakota 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 5-16-00 5. perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon acceptance  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 1134 Westrace Drive,  
Fargo, ND 58103  
(Current mailing address)
8. to build and conduct a general hotel business  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)  
Name: Gail Aikens  
Office Address: 2003 South Frontage Road  
Plant City, Florida, 33566  
(Zip code)

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**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.*

Gail Aikens  
(Registered agent's signature)

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

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: Gary Tharaldson

Address: 1134 Westrac Drive, Fargo, ND 58103

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: Gary Tharaldson

Address: same as above

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: Gary Tharaldson

Address: 1134 Westrac Drive, Fargo, ND 58103

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: Mark Knutson

Address: 1202 Westrac Drive, Fargo, ND 58103

Treasurer: Gary Tharaldson

Address: same as above

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**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Gary Tharaldson

(Typed or printed name and capacity of person signing application)

# State of North Dakota

## SECRETARY OF STATE



### CERTIFICATE OF GOOD STANDING

OF

HERITAGE INN & SUITES OF ORLANDO, INC.

The undersigned, as Secretary of State of the State of North Dakota, hereby certifies that HERITAGE INN & SUITES OF ORLANDO, INC., a North Dakota BUSINESS CORPORATION, was incorporated in this office on May 16, 2000 and, according to the records of this office as of this date, has paid all fees due this office as required by North Dakota statutes governing a North Dakota BUSINESS CORPORATION.

ACCORDINGLY the undersigned, as such Secretary of State, and by virtue of the authority vested in him by law, hereby issues this Certificate of Good Standing to

HERITAGE INN & SUITES OF ORLANDO, INC.

Issued: July 27, 2000

A handwritten signature in cursive script, reading "Alvin A. Jaeger".

Alvin A. Jaeger  
Secretary of State

00 SEP 13 AM 8:41

FILED

SECRETARY OF STATE  
FALL A. JAEGER, ORLANDO