# F01000002168

CONTACT: Tamara Odom  ACCOUNT #: 0721000000032  REF#: 956981-25  AUTHORIZATION: Patur  COST LIMIT: \$ 78.75	 		FILED  SECRETARY (** TAPE  131.88	-
ORDER DATE: OI/10/01			)3531567	3
ENTITY NAME: TOrvan Te	nant, 1			
ARTICLES OF INCORPORATION		90000	4064169°	
CERTIFICATE OF LIMITED PART	NERSHIP	-04/ ***	•	
QUALIFICATION				
CERTIFICATE OF LLC		90000 -04/	<b> 4064169:</b>  24 <u>/</u> 0101059013	∄
ARTICLES OF AMENDMENT		***	******78.75 *****78.75	5
STAMPED COPY	PLEASE RET	URN	Z/08=	

CERTIFICATE OF GOOD STANDING

RECEIVED

OF JAN TO PH 12: 59

ON THE STATE OF THE STATE

#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 10, 2001

TAMARA ODOM CSC

SUBJECT: TORVAN TENANT INC. Ref. Number: W01000000747

We have received your document for TORVAN TENANT INC. and the authorization to debit your account in the amount of \$78.75. However, the document has not been filed and is being retained for the following:

Based upon information provided by the Florida Department of Revenue, pursuant to section 213.053(14), Florida Statutes, it appears that TORVAN TENANT INC. has transacted business in Florida prior to submitting an "Application for Authority to Transact Business in Florida". The information received from the Florida Department of Revenue indicates January 1, 1998, as the initial date of transacting business in the State of Florida.

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$3450.00.

If you have any questions concerning the filing of your document, please call (850) 487-6917.

Gretchen Harvey Document Specialist Supervisor

Letter Number: 101A00001480

RESUB MARIE Please give original submission date as file date

S SUFFICIENCY OF FILING

DEPARTMENT OF STATE DIVISION OF CORPORATIONS
2001 APR 23 PM 3: 57

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

#### TRANSMITTAL LETTER

	fication/Tax Lien Section on of Corporations		
SUBJECT:	Torvan Tenant, Inc.		
**************************************	(Name of corporat	ion - must include suffix)	
Dear Sir or Ma	ıdam:		
The enclosed "Certificate of transact busine	'Application by Foreign Corporation for Existence", and check are submitted to ss in Florida.	r Authorization to Transact Busing register the above referenced fore	ess in Florida", eign corporation to
Please return al	ll correspondence concerning this matte	er to the following:	
	Trish Kristek	-	
	(Name o	of Person)	<del></del>
	Hyatt Corporation		
	(Firm/Co	ompany)	
	200 W. Madison		
	(Add	lress)	
	Chicago, IL 60606	· .	
	(City/St	ate/Zip)	- P - 9
Should you nee	d to call someone concerning this matte	er, please call:	
Trish Kri	stek at ( 312	750-8168	
(Name	of Person) (Area	Code & Daytime Telephone Nur	mber)
	•		
STREET ADD	RESS:	MAILING ADDRESS:	
Qualification/Ta		Qualification/Tax Lien Section	
Division of Corn 409 E. Gaines S		Division of Corporations	
Tallahassee, FL		P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a ch	eck for the following amount:	,	
□ \$70.00 Filing	Fee ☐ \$78.75 Filing Fee & ☐ Certificate of Status	Certified Copy Cert	50 Filing Fee, tificate of Status &

### 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.

words or abbre	oration; must include the word "INCO viations of like import in language as or partnership if not so contained in the	will clearly inc	licate that it is a corporation is	TION" or nstead of a
natural person (	or partnership it not so contained in the	de name at pres	ent.)	
2. Delaware		3.	36-4048180	
(State or country	under the law of which it is incorpo	rated)	(FEI number, if a	applicable)
4. October 2		. perpeti		
(Da	te of incorporation)	(Duratio	n: Year corp. will cease to ex	xist or "perpetual")
	1, 1998			
	transacted business in Florida.) (SEI		07.1501, 607.1502 and 817.1	55, F.S.)
7. 200 West 1	Madison, Chicago, Illinoi	s 60606		
				<u>`10</u> >
	(Current m	ailing address)		44 3
Holds int	orost in waviana 1:	7.4.4.4.4.		2 2 I
Purpose	erest in various limited s) of corporation authorized in home	state or country	companies	
				5.17
. Name and str	eet address of Florida registered	agent: (P.O.	Box or Mail Drop Box NO	OT acceptable)
Name:	Corporation Service Comp	pany		ejm ⊃
Office Address:	1201 Hays Street	-		
	Tallahassee		Florida 32301	
-		· · · · · · · · · · · · · · · · · · ·	Florida, 32301 (Zip code)	•
0. Registered as	gent's acceptance:			
	_			
Taving been name n this application	d as registered agent and to accept so	ervice of proces	ss for the above stated corpor	ation at the place designa
ompiy wun ine pro	I hereby accept the appointment as a prisions of all statutes relative to the	proper and con	t and agree to act in this cape aplete performance of my du	acity. I further agree to ties, and I am familiar wi
nd accept the oblis	gations of my position as registered o	TOPHI.	2 - Parternance of my un	, and I um jumillur Wil

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.

A. DIRECTORS (Street address only - P.O. Box NOT acceptable) Chairman: Address: Vice Chairman: Address: \_ Director: Thomas J. Pritzker Address: 200 West Madison Chicago, IL 60606 Director: Harold S. Handelsman Address: 200 West Madison Chicago, IL 60606 B. OFFICERS (Street address only - P.O. Box NOT acceptable) President: Thomas J. Pritzker Address: \_ 200 West Madison Chicago, IL 60606 Vice President: Frank Borg Address: \_\_200 West Madison Chicago, IL 60606 VP & Secretary: Harold S. Handelsman Address: 200 West Madison Chicago, IL 60606 Treasurer: Harold S. Handelsman Address: 200 West Madison Chicago, IL 60606 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) 14. Harold S. Handelsman, Its: VP, Secretary & Treasurer of Torvan Tenant, Inc. (Typed or printed name and capacity of person signing application)

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

## State of Delaware Office of the Secretary of State

PAGE 1

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TORVAN TENANT INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF JANUARY, A.D. 2001.

AND I DO HEREBY EURTHER CERTIFY THAT THE FRANCHISE TAXES
HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Harriet Smith Windson

Secretary of State

AUTHENTICATION: 0902310

DATE: 01-08-01

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