

# F02000003730

CORPORATION(S) NAME

Barclay Hospitality Services Inc.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 JUL 22 PM 2:50  
02 JUL 22 AM 11:07

2/22

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|--|---|---|
| <input checked="" type="checkbox"/> Profit   | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit           |   |   |
| <input checked="" type="checkbox"/> Foreign  | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|  | <input type="checkbox"/> Reinstatement          |   |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
|  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Photocopies            | <input checked="" type="checkbox"/> CUS     |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out            |   |   |

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
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Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

7/22/02

Order#: 5487996

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-07/22/02--01049--008

Ref#: \*\*\*\*\*78.75 \*\*\*\*\*78.75

Amount: \$ \_\_\_\_\_

5p

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

**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. Barclay Hospitality Services 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 Carolina 3. 56-2242010  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/22/2000 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 07/01/2002  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2626 Glenwood Avenue, Raleigh, NC 27608  
(Principal office address)
- same  
(Current mailing address)

8. To lease certain hotel properties from WINN Limited Partnership and various other affiliates of Winston Hotels, Inc.  
(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: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(City) (Zip code)

**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.*

C T Corporation System

By:   
(Registered agent's signature)

**Judith B. Argao**  
**Asst. Secretary & V. President**

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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: SEE ATTACHMENT

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

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

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

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

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

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

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

B. OFFICERS

President: SEE ATTACHMENT

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

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

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

Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

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

13. Brent V. West  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Brent V. West, Vice President  
(Typed or printed name and capacity of person signing application)

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Barclay Hospitality Services, Inc.  
List of Officers and Directors

**Director and Chief Executive Officer**

Robert W Winston  
2318 Beechridge Rd  
Raleigh, NC 27608  
919-349-2828  
237-74-3113

**Director and President**

James D Rosenberg  
3117 Bentley Forest  
Raleigh, NC 27612  
919-349-2821  
259-88-4797

**Director and Chief Financial Officer**

Joseph V Green  
1005 Country Club Dr  
Greensboro, NC 27408  
919-349-2820  
246-78-7982

**Executive Vice President**

Kenneth R Crockett  
2416 E Lake Dr  
Raleigh, NC 27609  
919-349-2822  
409-06-6391

**Controller, Vice President and Secretary**

Brent V West  
612 Walcott Way  
Morrisville, NC 27560  
919-349-2827  
075-46-0598

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# NORTH CAROLINA

## Department of The Secretary of State

### CERTIFICATE OF EXISTENCE

I, **ELAINE F. MARSHALL**, Secretary of State of the State of North Carolina, do hereby certify that

#### **BARCLAY HOSPITALITY SERVICES INC.**

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 11/22/2000, with its period of duration being Perpetual.

I **FURTHER** certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 **has been** delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this Jul 18, 2002.

*Elaine F. Marshall*  
Secretary of State