F03000005820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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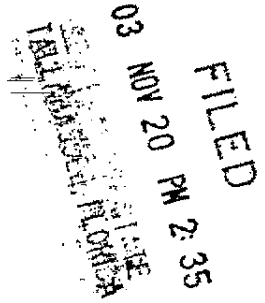
03 NOV 20 AM 11:21
DIVISION OF CORPORATION

FILED
03 NOV 20 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CT CORPORATION



November 20, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

Re: Order #: 5979510 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

4311 Parkside Innkeepers, Inc (NH)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Brigham Weir
Fulfillment Specialist
Brigham_Weir@cch-lis.com

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

A CCH LEGAL INFORMATION SERVICES COMPANY

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED
03 NOV 20 PM 2:35

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. **4311 Parkside Innkeepers, Inc.**
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. **New Hampshire**
(State or country under the law of which it is incorporated)

3. _____
(FEI number, if applicable)

4. Nov 17, 2003
(Date of incorporation)

5. **Perpetual**
(Duration: Year corp. will cease to exist or "perpetual")

6. **Upon Qualification**
(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. _____
(Principal office address)

1000 Market Street, Bldg.1, Ste. 300, Portsmouth, NH 03801
(Current mailing address)

8. **The operation and management of hotels and hotel related services.**
(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: **CT Corporation**

Office Address: 1200 South Pine Island Rd.

Plantation (City), Florida 33324 (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.

TRACI HOUCK
SPECIAL ASSISTANT SECRETARY

(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 business addresses of officers and/or directors:**

A. DIRECTORS

Chairman: **Douglas Greene**

Address: **1000 Market Street, Bldg.1, Ste. 300**

Portsmouth, NH 03801

Vice Chairman: **David Akridge**

Address: **1000 Market Street, Bldg.1, Ste. 300**

Portsmouth, NH 03801

Director: **RJ Greene**

Address: **1000 Market Street**

Portsmouth, NH 03801

Director:

Address:

B. OFFICERS

President: **Douglas Greene**

Address: **1000 Market Street, Bldg.1, Ste. 300**

Portsmouth, NH 03801

Vice President: **David Akridge**

Address: **1000 Market Street, Bldg.1, Ste. 300**

Portsmouth, NH 03801

Secretary: **Thomas M. Keane**

Address: **1000 Market Street, Bldg.1, Ste. 202, Portsmouth, NH 03801**

Treasurer: **RJ Greene**

Address: **1000 Market Street, Bldg.1, Ste. 300, Portsmouth, NH 03801**

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

13. _____
(Signature of Director or Officer listed in number 12 of the application)

14. **Thomas M. Keane, Secretary**
(Typed or printed name and capacity of person signing application)

State of New Hampshire
Department of State

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that 4311 PARKSIDE INNKEEPERS, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on November 17, 2003. I further certify that all fees required by the Secretary of State's office have been paid and that articles of dissolution have not been filed.

IN TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 18th day of November, A.D. 2003

William M. Gardner
Secretary of State