

Division of Corporations

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Florida Department of State
Division of Corporations
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Division of Corporations
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DIVISION OF CORPORATIONS

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FOREIGN PROFIT/NONPROFIT CORPORATION

Sycamore Hospitality Corporation

Certificate of Status	0
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TALLAHASSEE, FLORIDA
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Corporate Filing Menu

80-3-01
2008

**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. Sycamore Hospitality Corporation

(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. California

(State or country under the law of which it is incorporated)

3. 52-2378618

(FEI number, if applicable)

4. 12-03-1999

(Date of incorporation)

5. perpetual

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

6.

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 433 California Street, 7th Floor, San Francisco, CA 94104-2011

(Principal office address)

433 California Street, 7th Floor, San Francisco, CA 94104-2011

(Current mailing address)

8. Restaurant, catering or other lawful 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 NOT acceptable)

Name: **C T Corporation System**

Office Address: **1200 South Pine Island Road**

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.

C T Corporation System

By: Janet Gerkin

(Registered agent's signature)

Janet Gerkin
Special Asst. Secretary

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:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: Lawrence Lui

Address: 433 California Street, 7th Floor, San Francisco, CA 94104-2011

Vice Chairman: _____

Address: _____

Director: Corretti Lui

Address: 433 California Street, 7th Floor, San Francisco, CA 94104-2011

Director: Antony Carter

Address: 433 California Street, 7th Floor, San Francisco, CA 94104-2011

B. OFFICERS

President: Lawrence Lui

Address: 433 California Street, 7th Floor, San Francisco, CA 94104-2011

Vice President: _____

Address: _____

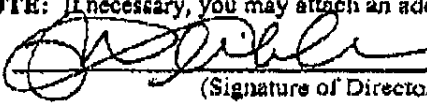
Secretary: Joyce M. Weible

Address: 433 California Street, 7th Floor, San Francisco, CA 94104-2011

Treasurer: CFO: James E.M. Evans

Address: 433 California Street, 7th Floor, San Francisco, CA 94104-2011

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. Joyce M. Weible, Secretary

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

**State of California
Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME:

SYCAMORE HOSPITALITY CORPORATION

FILE NUMBER: C2184001
FORMATION DATE: 12/03/1999
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: ACTIVE (GOOD STANDING)

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TALLAHASSEE, FLORIDA

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I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the entity is authorized to exercise
all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial
condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of October 01, 2008.

Debra Bowen

DEBRA BOWEN
Secretary of State