Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000017466 3)))

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Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY Account Number : 120000000195
Phone : (850)521-1000
Fax Number : (850)558-1515

\*\*Enter the email address for this business entity to be used for furth annual report mailings. Enter only one email address please.\*\*

Email Address:\_

#### FOREIGN PROFIT/NONPROFIT CORPORATION HPT TRS IHG-2, INC.

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Certificate of Status	0			
Certified Copy	0			
Page Count	06			
Estimated Charge	\$70.00			

Electronic Filing Menu Corporate Filing Menu

Help

### **COVER LETTER**

TO: New Filing Division o	g Section f Corporations					
SUBJECT: HPT TRS IHG-2, Inc.						
Name of corporation - must include suffix						
Dear Sir or Madan	n:					
"Certificate of Exi	plication by Foreign Corporation for Authorization to Transact Business in Florida," stence," or "Certificate of Good Standing" and check are submitted to register the foreign corporation to transact business in Florida.					
Please return all co	prrespondence concerning this matter to the following:					
Katherine L. Ber	gstrom					
	Name of Person					
Sullivan & Word	ester LLP					
	Firm/Company					
One Post Office	Square					
	Address					
Boston, MA 021	09					
	City/State and Zip code					
kbergstrom@san						
	E-mail address: (to be used for future annual report notification)					
For further inform	ation concerning this matter, please call:					
Katherine L. Ber	gstrom at (617) 210-6942					
Name of Person. Area Code & Daytime Telephone Number .						
New Filin Division o Clifton Bu 2661 Exec	of Corporations Division of Corporations					
Enclosed is a chec	k for the following amount:					
\$70.00 Filing	SFee S78.75 Filing Fee & S78.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy					

# 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.

I, HPT TRS IH	IG-2, Inc.			
(Enter name of	corporation; must inclu	de "INCORPORATED	," "COMPANY," "CORPORA	TION,"
"Inc.," "Co.," "C	Corp," "Inc," "Co," or "(	Corp.")		400 70
		,		19 7 1
<u></u>				Tr. 6
(If name unavai	lable in Florida, enter a	Iternate corporate name	adopted for the purpose of trans	sacting business in Florida
2. Maryland			20-2131948	F. 2. 1
(State or country	under the law of which	h it is incorporated)	(FEI number, i	f applicable)
4, 01/06/2005		5.	Perpetual	a la
(Dat	e of incorporation)	• • • • • • • • • • • • • • • • • • • •	(Duration: Year corp. will ce	ase to exist or "perpetual")
6. 01/01/2012				
			in Florida, if prior to registration 502, F.S., to determine penalty l	
7 Two Newton	Place, 255 Washin	gton Street: Suite 30	00, Newton, MA 02458	
/. <u></u>		(Principal office ad		
Two Newton	Place, 255 Washin	gton Street, Suite 3	00, Newton, MA 02458	
		(Current mailing ad		**
•				· 2
8. To acquire, owr	i, operate, lease, improv	e and renovate real pro	perty and the improvements ther	eon.
(Purpose	(s) of corporation autho	rized in home state or c	ountry to be carried out in state	of Florida)
9. Name and stre	et address of Florida	registered agent: (P.	O. Box NOT acceptable)	至三
Name:	Corporation Ser	vice Company	·	SSE IM
Office Address:	1201 Hays Stree	t	<u>·                                    </u>	Egr S
	Tallahassee		, Florida 32301	
		(City)	(Zip code)	EM.
10 Registered s	igent's acceptance:			•
Having been nat	ned as registered age			tated corporation at the place
designated in thi	s application, I herei	by accept the appoint	ment as registered agent and	agree to act in this capacity. I
			retative to the proper and col osition as registered agent.	nplete performance of my duties,
	Corporation Servi		,	•
	1/1/	h	•	
	By:	M (		
_	(Regis	stered agent's signature	) ROBERT BRANC	4. 1981. U.F
				/

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.

## FILED

12. Names and business addresses of officers and/or directors: 12 JAN 20 AM 11: 46 A. DIRECTORS SECRETARY OF STATE Chairman: SEE EXHIBIT A TALLAHASSEE, FLORIDA Address: Vice Chairman: Address: Director: \_ Address: Director: Address: **B. OFFICERS** President: SEE EXHIBIT A 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. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. John G. Murray, President, Chief Operating Officer & Secretary

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1/20/2012 3:33:19 PM PAGE

5/006 Fax Server

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12 JAN 20 AM 11: 46

HPT TRS IHG-2, INC.

SECRETARY OF STATE TALLAHASSEE. FLORIDA

#### Exhibit A

**Officers** 

Office

President, Chief

Operating Officer and

Secretary

John G. Murray

Two Newton Place

255 Washington Street, Suite 300

Newton, MA 02458

Senior Vice President

Ethan S. Bornstein

Two Newton Place

255 Washington Street, Suite 300

Newton, MA 02458

Treasurer and Chief Financial Officer

Mark L. Kleifges

Two Newton Place

255 Washington Street, Suite 300

Newton, MA 02458

Assistant Secretary

Jacquelyn S. Anderson

Two Newton Place

255 Washington Street, Suite 300

Newton, MA 02458

**Directors** 

Name

Address

Adam D. Portnoy

Two Newton Place

255 Washington Street, Suite 300

Newton, MA 02458

Barry M. Portnoy

Two Newton Place

255 Washington Street, Suite 300

Newton, MA 02458

John G. Murray

Two Newton Place

255 Washington Street, Suite 300

Newton, MA 02458

# STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT HPT TRS IHG-2, INC., INCORPORATED JANUARY 06, 2005, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALITES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JANUARY 13, 2012.

Paul B. Anderson Charter Division FILED WILL 16
12 JAN 20 AM III: 146
SECRETARSEE, FLORIES



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

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