

F19000002828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

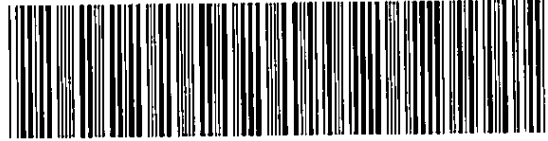
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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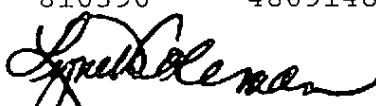
FILED  
19 JUN 18 PM 6:42  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

RECEIVED  
19 JUN 18 PM 4:36  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

K. SALY

JUN 19 2019

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 810390 4809148  
AUTHORIZATION :   
COST LIMIT : \$ 125.00

-----  
ORDER DATE : June 17, 2019  
ORDER TIME : 1:08 PM  
ORDER NO. : 810390-070  
CUSTOMER NO: 4809148  
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FOREIGN FILINGS

NAME: HILTON EMPLOYER INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: \_\_\_\_\_

## COVER LETTER

TO: Registration Section  
Division of Corporations  
Hilton Employer Inc.

SUBJECT: \_\_\_\_\_  
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:  
Abigail Horchkin

_____	Name of Person
Hilton	
_____	Firm/Company
7930 Jones Branch Drive	
_____	Address
McLean, VA 22102	
_____	City/State and Zip code
vera.stoicoff@hilton.com	
_____	E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Abigail Horchkin	703	883-5732
_____	at (_____)	_____
Name of Person	Area Code	Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$87.50 Filing Fee,<br>Certificate of Status &<br>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.

Hilton Employer Inc.

1. \_\_\_\_\_  
(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)  
Delaware

2. \_\_\_\_\_ 3. \_\_\_\_\_  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
6/11/19

4. \_\_\_\_\_ 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)  
Upon filing

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)  
7930 Jones Branch Drive, McLean, VA 22102

7. \_\_\_\_\_  
(Principal office address)  
\_\_\_\_\_  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301  
(City) (Zip code)

9. 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.*

Corporation Service Company  
By: Roxanne Turner  
(Registered agent's signature)

Roxanne Turner  
Asst. Vice President

10. 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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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

See attached list of directors and officers

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

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

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

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

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

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

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

**B. OFFICERS**

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

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.

12. Abigail Hoichkin  
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 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.

Abigail Hoichkin, Assistant Secretary

13. \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

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Name	Title	Business Address
W. Steven Standerfer	Director	7930 Jones Branch Dr. McLean, VA 22102
Michael Duffy	Director	7930 Jones Branch Dr. McLean, VA 22102
Frederick Schacknies	Director	7930 Jones Branch Dr. McLean, VA 22102
Kevin Jacobs	President	7930 Jones Branch Dr. McLean, VA 22102
Kristin Campbell	Executive Vice President, General Counsel and Secretary	7930 Jones Branch Dr. McLean, VA 22102
W. Steven Standerfer	Senior Vice President	7930 Jones Branch Dr. McLean, VA 22102
Daniel Hughes	Senior Vice President	7930 Jones Branch Dr. McLean, VA 22102
Keith Clampet	Senior Vice President	7930 Jones Branch Dr. McLean, VA 22102
Frederick Schacknies	Senior Vice President and Treasurer	7930 Jones Branch Dr. McLean, VA 22102
Margo Holt	Vice President	7930 Jones Branch Dr. McLean, VA 22102
Justin Hensley	Assistant Treasurer	7930 Jones Branch Dr. McLean, VA 22102
Alexandra Neely	Assistant Treasurer	7930 Jones Branch Dr. McLean, VA 22102
Owen Wilcox	Assistant Secretary	7930 Jones Branch Dr. McLean, VA 22102
James Smith	Assistant Secretary	7930 Jones Branch Dr. McLean, VA 22102
Abigail Hotchkin	Assistant Secretary	7930 Jones Branch Dr. McLean, VA 22102

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HILTON EMPLOYER 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 SEVENTEENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HILTON EMPLOYER INC." WAS INCORPORATED ON THE ELEVENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

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STATE  
TALLAHASSEE, FLORIDA



  
Jeffrey W. Bullock, Secretary of State

7461318 8300

SR# 20195488710

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 203042992

Date: 06-17-19