

Donor Member Only

F96000001340

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301

222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

FLORIDA SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32301

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1803, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE
STATE OF FLORIDA:

1. REGISTRATION AGENT MANAGEMENT, INC.
(Name of corporation. Must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words of
abbreviation of the proper language as will clearly indicate that it is a corporation instead of a natural person
or partnership if not as contained in the name of present.)

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

3. 28-1776168
(FBI Number, if applicable)

4. December 7, 1993
(Date of incorporation)

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

6. None
(See the provisions of the Florida Statutes, (see sections 607.1801, 607.1802, and 607.1803, F.S.))

7. 1200 SOUTH AVENUE, SUITE 100, CHICAGO, ILL. 60606
(Current mailing address)

8. Registration Agent Management
(Address of corporation authorized in home state or country to be carried out in the state of
Florida)

9. Name and street address of Florida registered agent:

Name: C.T. Corporation System

Office Address: 119 C.T. Corporation System, 1200 South Pine

Registration Florida, Florida, 33334
(Zip Code)

10. Registered agent acceptance:

Having been named as registered agent and to accept service of process for the above named 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 obligation of my position as registered agent.

C.T. Corporation System

Barbara A. Burke

(Registered Agent's Signature) (Print)

SPECIAL ASSISTANT SECRETARY

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

11. Attached is a certificate of existence duly authenticated, not more than 60 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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Edward J. Williams

Address: 20042 2nd Avenue West

Palmdale, Florida 33062

Director: _____

Address: _____

B. OFFICERS

President: Edward J. Williams

Address: 20042 2nd Avenue West

Palmdale, Florida 33062

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. *Edward L. Williams*
(Signature of Chairman, Vice Chairman, or any other officer in number 12 of the application) _____

14. Edward L. Williams, President
(Typed or printed name and capacity of person signing application) _____

State of Delaware
Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOSPITALITY ASSET MANAGEMENT, 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 TWELFTH DAY OF MARCH, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
96 MAR 15 PM 12:56



Edward J. Freel
Edward J. Freel, Secretary of State

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AUTHENTICATION

7861921

DATE

03-12-96