

L06U00093574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

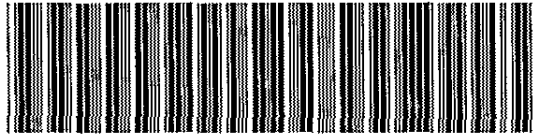
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 474784 7182921

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$ 125.00

FILED  
06 SEP 25 AM 10:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : September 22, 2006

ORDER TIME : 5:46 PM

ORDER NO. : 474784-005

CUSTOMER NO: 7182921

DOMESTIC FILING

NAME: OWN A HOTEL ROOM, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Pollye Janisse - EXT. 2954

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

OWN A HOTEL ROOM, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

7380 SAND LAKE ROAD  
5TH FLOOR  
ORLANDO, FLORIDA 32819

Mailing Address:

7380 SAND LAKE ROAD  
5TH FLOOR  
ORLANDO, FLORIDA 32819

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee

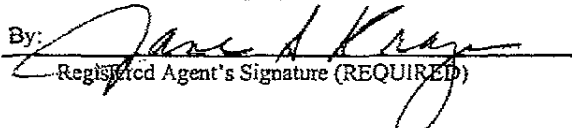
FL 32301

City, State, and Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..*

Corporation Service Company

By:

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member

KISSIMMEE, FLORIDA 34744-5109

\_\_\_\_\_

**REQUIRED SIGNATURE:**

Typed or printed name of signee

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