L12000161988

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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EXAMINER

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TALLAHASSEE, FLORIDA

W12-62230

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 460179 4380339

AUTHORIZATION :

COST LIMIT : $ 160.00

ORDER DATE : December 14, 2012

ORDER TIME : 3:43 PM

ORDER NO. : 460179-010

CUSTOMER NO: 4380339

DOMESTIC FILING

NAME: HEATHROW HOTELS 2012 MANAGER, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kimberly Moret - EXT. 52949

EXAMINER'S INITIALS: _____

(850) 245-6051.

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Heathrow Hotels 2012 Manager, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven A. Solomon
Name of Person

Solomon and Maged
Firm/Company

51 Monroe Street, Suite 1505
Address

Rockville, Maryland 20850
City/State and Zip Code

ssolomon@pinnacletitle.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Solomon at (301) 279-4222
Name of Person — Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ $125.00 Filing Fee
- ☐ $130.00 Filing Fee & Certificate of Status
- ☐ $155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- ■ $160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 28, 2012

RESUBMIT
Please give original submission date as file date.

CSC 3RD ATTEMPT
KIMBERLY MORET
,

SUBJECT: HEATHROW HOTELS 2012 MANAGER, LLC
Ref. Number: W12000062200

We have received your document for HEATHROW HOTELS 2012 MANAGER, LLC. However, the document has not been filed and is being returned for the following:

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on December 14, 2012. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Gina McLeod
Regulatory Specialist II

Letter Number: 812A00029683

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TO ACKNOWLEDGE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

Heathrow Hotels 2012 Manager, LLC

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

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
1480 Royal Palm Beach Blvd	1480 Royal Palm Beach Blvd
Suite A	Suite A
Royal Palm Beach, FL 33311	Royal Palm Beach, FL 33311

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 FL
City, State, and Zip

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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..

Kimberly B. Moret as its agent
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Steven Fairbanks 36750 US 19 North Palm Harbor, Florida 34684
MGRM	Richard Vilardo 13217 Ridge Drive Rockville, Maryland 20850
MGRM	Ronald Franklin 1480 Royal Palm Beach Blvd, Suite A Royal Palm Beach, FL 33311

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: December 7,2012 . (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Steven Fairbanks
Typed or printed name of signee

Filing Fees:

$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)