

Document Number Only  
**L99000000871**

CT Corporation System  
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Tallahassee, FL 32301  
Tel 850 222 1092  
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Attn: Jeff Netherton

900002776899--4  
-02/16/99--01047--018  
\*\*\*\*\*250.00 \*\*\*\*\*250.00

900002776899--4  
-02/16/99--01047--019  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

CORPORATION(S) NAME

Metro One Hotel, LLC

99 FEB 16 PM 12: 04

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<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name L99-871 02/16/99  
Availability \_\_\_\_\_  
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Examiner [Signature]  
Updater [Signature]  
Verifier [Signature]  
Acknowledgement \_\_\_\_\_  
W.P. Verifier [Signature]

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TALLAHASSEE, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: Metro One Hotel, LLC

### ARTICLE II - Address:

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

901 Woodbriar Court, Fort Walton Beach, Florida 32547

### ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

perpetual

### ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Sam Chang, 901 Woodbriar Court, Fort Walton Beach, Florida 32547

### ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: 2/3 vote to admit

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**ARTICLE VI - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: 2/3 vote

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**ARTICLE VII - Affidavit of Membership and Contributions**

The undersigned member or authorized representative of a member of Metro One Hotel, LLC

\_\_\_\_\_ certifies:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 1,000.00;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0;  
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 1,000.00.

  
\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**

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

Sam Chang

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$250.00 for Articles and Affidavit**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Metro One Hotel, LLC

2. The name and address of the registered agent and office is:

C T CORPORATION SYSTEM  
(Name)

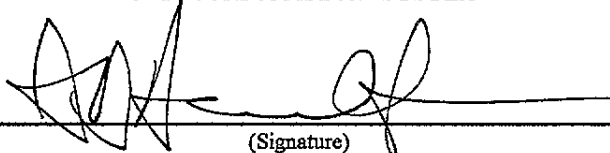
c/o C T CORPORATION, 1200 South Pine Island Road,  
(P.O. Box not acceptable)

Plantation, Florida 33324  
(City/State/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.*

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(Signature)

2/12/99

(Date)

A.D. Hamilton, Assistant Secretary

FILING FEE: \$ 35 for Designation of Registered Agent