PLEASE READ	ALL INSTRUCTIONS BEFORE	COMPLETING THIS FORM.
LIMITED LIABILITY COMPANY REINSTATEMENT	FLORIDA DEPARTMENT OF STATI Katherine Harris Secretary of State DIVISION OF CORPORATIONS	FILED 02 JUNII PM 1: 14
DOCUMENT # 1. Limited Liability Company's Name		SECRETARY OF STATE TALLAHASSEE, FLORIDA
M0000000374 Hardin Capital, LLC		
		1000057641515 -06/13/0201007006 ****200.00 ****200.00
2. Principal Office Address	3. Mailing Office Address	
3715 Northside Parkway	3715 Northside Parkway	4. State/Country of Formation Georgia
Suite, Apt. #, etc. Bldg., 400, Suite 200 Suite, Apt. #, etc. Bldg., 400, Suite 200		5 Date Organized or Qualified
City & State	City & State	To Do Business in Florida 2/24/00
Atlanta, GA	Atlanta, GA	6. FEI Number Applied For Not Applicable
Zip Country 30327 Fulton	Zip Country 30327 Fulton	7- CERTIFICATE OF STATUS DESIRED S5.00 Additional Fee required for a Certificate of Status
	8. Name and Address of Current Regi	stered Agent
Street Address (P.O. Box Number is Not Acceptable) 526 East Park Avenue Sulte, Apt. #, Etc. City Tallahassee State Zip Code FL 32301 9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN		
10. Names and Street Addresses of Managing Me	mbers/Managers	
Titles Name of Managing Members/Managing	Street Address of gers Managing Member/N	
MGRM RECP Hardin Holdings, LLC 3715 Northside Parks		Atlanta, GA 30327
		AL
·		50.00-CF 150.00-Adm
		150,00-Adm
11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filling this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.		
Signature of Managing Member/Manager SEE ATTACHED Date 4/30/02 Daytime Phone # 404-264-3500		
Typed or printed name of signing Managing Member/Manager M. Brantley Barrow		

SIGNATURE PAGE FOR HARDIN CAPITAL, LLC TO

FILED

FORM LLC-50.15

02 JUN 11 PM 1: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

HARDIN CAPITAL, LLC a Georgia limited liability company

RECP Hardin Holdings, L.L.C., a Delaware limited By: liability company, its sole Member

> Hardin Owner, LLC, a Georgia limited liability company, a Member and its Operating Manager.

> > HGI Hotel Partners, LLC, a Georgia limited By: liability company, its sole Member

> > > The Hardin Group, LLC, a Georgia limited liability By: company, its Managing Member

> > > > THG, Inc., a Georgia corporation, By: its Managing Member

Name: M. Brantley Barrow
Title: Vice President