

# MO1000002107



ACCOUNT NO. : 072100000032

REFERENCE : 468791 4322404

AUTHORIZATION :

*Patricia Piguet*

COST LIMIT : \$ 130.00

ORDER DATE : September 12, 2001

ORDER TIME : 9:51 AM

ORDER NO. : 468791-065

CUSTOMER NO: 4322404

CUSTOMER: Ms. Rhonda Braucht  
Jenkins & Gilchrist  
Suite 3200  
1445 Ross Avenue  
Dallas, TX 75202-2711

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## FOREIGN FILINGS

NAME: FELCOR/MS CMBS HOTELS GP,  
L.L.C.

*File  
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XXXX QUALIFICATION (TYPE: LL)

200004593382--5

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -- EXT# 1114

EXAMINER: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*mtu  
9/17*

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. FELCOR/MS CMBS HOTELS GP, L.L.C.  
(Name of foreign limited liability company)
2. DELAWARE 3. \_\_\_\_\_  
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)
4. SEPTEMBER 4, 2001 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. upon qualification  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 545 E. JOHN CARPENTER FREEWAY, SUITE 1300  
IRVING, TEXAS 75062  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒


9. The name and usual business addresses of the managing members or managers are as follows:

SEE ATTACHMENT "A"

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: \_\_\_\_\_

TO ACT AS GENERAL PARTNER OF FELCOR/MS CMBS HOTELS, L.P.

  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

LAWRENCE D. ROBINSON, MANAGER

Typed or printed name of signee

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**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

FELCOR/MS CMBS HOTELS GP, L.L.C.

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

<u>Corporation Service Company</u>		
(Name)		
<u>1201 Hays Street</u>		
Florida street address (P.O. Box <u>NOT</u> ACCEPTABLE)		
<u>Tallahassee</u>	<u>FL</u>	<u>32301</u>
(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 as provided for in Chapter 608, F.S.*

  
\_\_\_\_\_  
(Signature)  
**BRIAN COURTNEY, ASST. V.P.**

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

ATTACHMENT "A"

MANAGERS:

THOMAS J. CORCORAN, JR.      545 E. JOHN CARPENTER FREEWAY, STE 1300  
IRVING, TEXAS 75062

LAWRENCE D. ROBINSON      545 E. JOHN CARPENTER FREEWAY, STE 1300  
IRVING, TEXAS 75062

JOHN E. LESLIE      545 E. JOHN CARPENTER FREEWAY, STE 1300  
IRVING, TEXAS 75062

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TALLAHASSEE, FLORIDA

*State of Delaware*  
*Office of the Secretary of State*

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FELCOR/MS CMBS HOTELS GP, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF SEPTEMBER, A.D. 2001.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3432632 8300

AUTHENTICATION: 1338532

010451191

DATE: 09-12-01