20002148 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Pick up time Certified Copy Mail out Will wait ☐ Photocopy Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment 200004602172--09/20/01--01019--012 NonProfit Resignation of R.A., Officer/Director ****160.00 ****160.00 Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER RILINGS REGISTRATION QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation F\$160.00 Reinstatement Trademark

Examiner's Initials

Other

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

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

I. Heather Honey Hotels, LIC	live	ited liability company)		_
	11111	ned namintry company)		
2. Belaware (Jurisdiction under the law of which foreign limited liability	3.	Applied for		
company is organized)		(FEI number, if applicable)		
4. August 16, 2001 (Date of Organization)	5.	Perpetual		
	J	(Duration: Year limited liability compa exist or "perpetual")	ny will co	asc to
6. No business conducted to date		- Perpettal)	-	
(Date first transacted business in Florida. (See	sec	tions 608,501, 608,502, and 817,155, E		
7. 1209 Orange Street		, oo 1002, and 017.1131, F.	3.)	
Wilmington, New Castle County, Delaward	e	19801		
(Street address	of p	rincipal office)	 	
 If limited liability company is a manager-managed of the name and usual business addresses of the mana Heather McFadyen 			SECREJAR TALLABASS	01 SEP 17
c/o Murphy-Matthews and Associates, Inc	z.		Y OF STA	ů.
14626 N. Dale Mabry Highway			PA SE	- (
Tampa, Florida 33618				
 Attached is an original certificate of existence, no more than 90 da the jurisdiction under the law of which it is organized. (A photocorranslation of the certificate under eath of the translator must be su 	ipiu Ch	itted)	neign lang	gvag e, a
. Nature of business or purposes to be conducted or pr	ron	noted in Florida: Ownership an	d oper	ation
of motels and hotels	7 -			-
A set I	Z			
Signature of a member or an autho (In accordance with section 608.408(3), F.S., an affirmation under the penalties of perjury to	rize the c	ed representative of a member. execution of this document constitutes the facts stated hemin are constitutes		

Typed or printed name of signee

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 "HEATHER HONEY HOTELS, LLC" 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 SEVENTEENTH DAY OF AUGUST, A.D. 2001.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Warriet Smith Windson, Secretary of State

3426383 8300

AUTHENTICATION: 1300542

010405764

DATE: 08-17-01

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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: Heather Honey Hotels, LLC	
2. The name and the Florida street address of the registered agent and o	ffice are:
C T Corporation System (Name)	• .
1200 South Pine Island Road Florida street address (P.O. Box NOT ACCEPTABLE)	OI SEP SECRET TALL:AH
Plantation, FL 33324 (City/State/Zip)	FILED 17 PH 5: TARY OF SI ASSEE, FLO

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.

Robin LaPeters
Vice President

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