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**FOREIGN LIMITED LIABILITY COMPANY**

Felcor/JPM LBV Hotel, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

**MO3-1904**  
**ck**

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

IN COMPLIANCE WITH SECTION 608.502, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTIONS BUSINESS IN THE STATE OF FLORIDA:

1. FELCOR/PM LBV HOTEL, L.L.C.  
(Name of foreign limited liability company)
2. DELAWARE  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. APPLIED FOR  
(FEI number, if applicable)
4. JUNE 9, 2003  
(Date of Organization)
5. PERPETUAL  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON FILING  
(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:

- MGR — THOMAS J. CORCORAN, JR., 545 E. JOHN CARPENTER FRWY., STE 1300, IRVING, TX 75062
- MGR — LAWRENCE D. ROBINSON, 545 E. JOHN CARPENTER FRWY., STE 1300, IRVING, TX 75062
- MGR — THOMAS L. WIESE, 545 E. JOHN CARPENTER FRWY., STE 1300, IRVING, TX 75062
- MGR — JOHN E. LESLIE, 545 E. JOHN CARPENTER FRWY., STE 1300, IRVING, TX 75062

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 OWN AND OPERATE HOTELS



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 signer

## 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/JPM LSV HOTEL, L.L.C.

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

<u>CT Corporation System</u>		
(Name)		
<u>c/o CT Corporation System, 1200 South Pine Island Road</u>		
Florida street address (P.O. Box <u>NOT</u> ACCEPTABLE)		
<u>Plantation,</u>	<u>FL</u>	<u>33324</u>
(City/State/Zip)		

RECORDED  
FILED  
JUN 12 AM 9:35  
TALLAHASSEE, FLORIDA

*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.*

By: Michael E. Jones  
 (Signature) Michael E. Jones  
Assistant Secretary

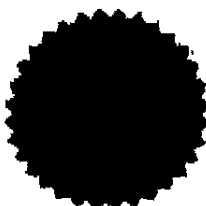
\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FELCOR/JFM LEV HOTEL, 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 NINTH DAY OF JUNE, A.D. 2003.



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

3667854 8300

AUTHENTICATION: 2462100

030379194

DATE: 06-09-03

TOTAL P.04