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#### **CT** CORPORATION

October 12, 2004

Department of State, Florida 409 East Gaines Street Tallahassee FL 32399 ALCONO. TO SALE.

Re:

Order #: 6210423 SO

Customer Reference 1:

Customer Reference 2:

Dear Department of State, Florida:

Please file the attached:

Kuzzins Bowden Hospitality III, LLC (ME) Registration

Florida

Kuzzins Bowden Hospitality III, LLC (ME) Cert Copy of Application for Authority-Foreign

Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to the attention of the undersigned.

(850) 222-1092. Thank you very much for your help.

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 **CT** CORPORATION

Sincerely,

Jennifer Mulphy Fulfillment Specialist

Jennifer\_Murphy@cch-lis.com

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER AGOREGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA;

1.	Kuzzins Bowden Hospitality III, LLC
	(Name of Foreign Limited Liability Company)
2.	Maine 3. 20-1714607 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
•	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	September 27, 2004 (Date of Organization)  5. Perpetual (Duration: Year limited liability company will cease to
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	300 Woodbury Avenue, Portsmouth NH 03801
	(Street Address of Principal Office)
0	If limited linkility company is a manager managed company about how
٥.	If limited liability company is a manager-managed company, check here $\frac{1}{2}$
9.	The name and usual business addresses of the managing members or managers are as follows:
	CC&S Development, LLC, 199 Wells Avenue, Newton MA 02459-0332
	Tarpon Springs Investors, LLC, 300 Woodbury Avenue, Portsmouth NH 03801
10	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
1116	jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
tra	nslation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida: Hotel Operation
	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.)
	Benjamin March
	Typed or printed name of signee

# 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:		
Kuzzins Bou	wden Hospitality III, LLC	
2. The name and the B	Florida street address of the registered agent and office are:	
(	CT Corporation System	
	(Name)	
1200	) South Pine Island Road	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation FL 33324	
	City/State/Zip	
liability company at the agent and agree to act relating to the proper a obligations of my positi	registered agent and to accept service of process for the above stated limited of place designated in this certificate, I hereby accept the appointment as registered in this capacity. I further agree to comply with the provisions of all statutes and complete performance of my duties, and I am familiar with and accept the ion as registered agent as provided for in Chapter 608, Florida Statutes.  PETER F. SOUZA  ASSISTANT SECRETARY  Signature)	

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

#### State of Maine



### **Department of the Secretary of State**

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the records of formation, amendment and cancellation of articles of organization of limited liability companies and annual reports filed by the same.

I further certify that KUZZINS BOWDEN HOSPITALITY III, LLC is a duly formed limited liability company under the laws of the State of Maine and that the date of formation is September 27, 2004.

I further certify that said limited liability company has filed annual records due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the articles of organization and that according to the records in the Department of the Secretary of State, said limited liability company is a legally existing limited liability company in good standing under the laws of the State of Maine at the present time.

In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this seventh day of October 2004.

DAN GWADOSKY
Secretary of State

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