

Division of Corporations Public Access System

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Division of Corporations

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FOREIGN LIMITED LIABILITY COMPANY

MHG of Gainesville, Florida #3, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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07/28/2005 16:38 8502227615 CI CORPORATION

4046886498 P. 02ED

Application by foreign limited liability company for authorization 28 6 $^{10:0}$ SECRETARY OF STAT

	INESS INTHE STATE OF FLORIDA:
1. MHG of Gainesville, Florida #3, LLC	_
(Nam	e of foreign limited liability company)
2. Georgia (Jurisdiction under the law of which foreign limit	3. (FEI number, if applicable)
company is organized) 4. 6/2/05	5, Perpenual
(Date of Organization)	(Duration: Year limited liability company will dease to exist or "perpetual")
5. Upon Qualification	
•	Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7. 402 Washington Street, Suite 200	
Gainesvilla, GA 30501	treet address of principal office)
(5)	more man err or buttlethen orwine)
 If limited liability company is a manager 	r-managed company, check here
. The name and usual business addresses	of the managing members or managers are as follows:
McKibbon Hotel Group, Inc.	- -
402 Washington Street, Suite 200	
Gainesville, GA 30501	
	anized. (A photocopy is not acceptable. If the certificate is in a foreign language
the jurisdiction under the law of which it is orga- translation of the certificate under eath o	o more than 90 days old, duly suthenticated by the official having custody of records unized. (A photocopy is not acceptable. If the certificate is in a foreign language of the translator must be submitted.) onducted or promoted in Florida: Hotel Operations

Typed or printed name of signee

CT CORP

07/28/2005 16:38 JUL-28-2005 15:55

8502227615

CT CORPORATION

4248886498 P.03/07 FILED

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CERTIFICATE OF DESIGNATION OF SECRETARY OF STATE TALLAHASSEE, FLORIDA 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	- OSTANITATION OF THE STANDARD PROPERTY IN THE
1. The name of the Li	mited Liability Company is:
MHO of Gainesville, Flor	ida #3, LLC
2. The name and the I	lorida street address of the registered agent and office are:
	C T Corporation System
	(Name)
_	c/o C T Corporation System, 1200 South Pine Island Road
***	Florida street address (P.O. Box NOT ACCEPTABLE)
Plant	
_	(City/State/Zip)
liability company at the registered agent and as statutes relating to the accept the obligations	registered agent and to accept service of process for the above stated limited place designated in this certificate, I hereby accept the appointment as tree to act in this capacity. I further agree to comply with the provisions of all proper and complete performance of my duties, and I am familiar with and of my position as registered agent as provided for in Chapter 608, F.S.
By Dace W.	Mouse Mouse
DAI. Assistan	T V. Morris T 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)

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CT CORPORATION

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FORM NUMBER

4048886498 P.04/07

Secretary of State
Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CONTROL NUMBER 1 0539969
HATE INC/RUTH/FILED: 05/02/2005
JURISDICTION : GEORGIA
PRINT DATE : 07/28/2005

: 211

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JECRETARY OF STATE TALLAHASSEE, FLORIDA

CT CORPORATION SYSTEM DALE MORRIS 1201 PEACHTREE STREET, N.E. ATLANTA, GA 30361

CERTIFICATE OF EXISTENCE

I. Cathy Cox, the Sacretary of State of the Mate of Georgia, do hereby certify under the seal of my office them to of the annual print date

succes of the state of the stat

is in compliance with the approache filing and annual registration provisions of Title 14 of the of the confision course the confision of the

Said entity was formed in the jurisdiction instead shows or was authorized to transact business in Georgia of the said and has not filed articles of dissolution, certificate of Eshcellation or any other similar document with the Office of the Seignan of The.

This certificate relates only to the least enterior of the above-named entity as of the print date above. It does not certify whenter or not a notice of intent to dissolve an application for withdrawal, a spatement of commencement of winding up or any other english document was been filled or is pending with the Secretary of States.

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Ended and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20050728198408376



Cathy Cox Secretary of State