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SECRETARY OF STATE TALLAHASSEE, FLORID.

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ACCOUNT NO. : 072100000032

REFERENCE : 908215

4380869

AUTHORIZATION

ORDER DATE: March 8, 2006

ORDER TIME : 2:14 PM

ORDER NO. : 908215-005

CUSTOMER NO: 4380869

#### FOREIGN FILINGS

NAME: LANCO HOSPITALITY LLC

THE THE PARTY OF T

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_ CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER: \_\_\_

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

IMITED LIABILITY COMPANY TO TRANSAC	CT BUSINESS IN THE STATE OF FLORIDA:
LANCO HOSPITALITY LLC	1200 mg
(Name	of Foreign Limited Liability Company)
DELAWARE	3. 20-3678838
(Jurisdiction under the law of which forei	ign limited liability (FEI number, if applicable)
October 17, 2005	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
·	·
(Date first trans (See sections 608	sacted business in Florida, if prior to registration.) 8.501 & 608.502 F.S. to determine penalty liability)
•	, , , , , , , , , , , , , , , , , , , ,
•	
188 Union Street, Hingham, MA 02043	l e e e e e e e e e e e e e e e e e e e
	(Street Address of Principal Office)
Teliminal liability, same and a sur-	anness managed assurance absolutes [4]
. If limited liability company is a m	nanager-managed company, check here
· · · · · · · · · · · · · · · · · · ·	
. The name and usual business add	resses of the managing members or managers are as follows:
· -	resses of the managing members or managers are as follows:
James Reiser 188 Union Street, Hingl	resses of the managing members or managers are as follows:
James Reiser 188 Union Street, Hingl	resses of the managing members or managers are as follows:
James Reiser 188 Union Street, Hingl	resses of the managing members or managers are as follows:
James Reiser 188 Union Street, Hingl	resses of the managing members or managers are as follows:
James Reiser 188 Union Street, Hingi Kirt Lang 23225 Harvard Shore, C	resses of the managing members or managers are as follows:  ham, MA 02043  Clinton Township, MI 48035  nce, no more than 90 days old, duly authenticated by the official having custody of records it
The name and usual business add:  James Reiser 188 Union Street, Hingl  Kirt Lang 23225 Harvard Shore, C  O. Attached is an original certificate of exister  e jurisdiction under the law of which it is org	ham, MA 02043  Clinton Township, MI 48035  noe, no more than 90 days old, duly authenticated by the official having custody of records in particular (A photocopy is not acceptable. If the certificate is in a foreign language, a
James Reiser 188 Union Street, Hingi Kirt Lang 23225 Harvard Shore, C  O. Attached is an original certificate of exister to jurisdiction under the law of which it is org	ham, MA 02043  Clinton Township, MI 48035  noe, no more than 90 days old, duly authenticated by the official having custody of records in particular (A photocopy is not acceptable. If the certificate is in a foreign language, a
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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

TO DESIGN FLORIDA	ATE A REGISTERED OF	FICE AND REGISTERED AGENT IN	THE STATE OF
1. The name	of the Limited Liability C	ompany is:	
LANCO HOS	PITALITY LLC		
2. The name	and the Florida street addr	ress of the registered agent and office a	ire:
	CORPORATION SERVICE	CE COMPANY	
		(Name)	
	1201 Hays Street		
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	FL 32301	- <del></del>
		City/State/Zip	
liability comp agent and age relating to the obligations of	oany at the place designated ree to act in this capacity. I e proper and complete perfo	and to accept service of process for the of in this certificate, I hereby accept the a further agree to comply with the provisormance of my duties, and I am familiar agent as provided for in Chapter 608, Fl	ppointment as registered ions of all statutes with and accept the

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PAGE 1

## Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LANCO HOSPITALITY 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 TWENTY-THIRD DAY OF FEBRUARY, A.D. 2006.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LANCO HOSPITALITY LLC" WAS FORMED ON THE SEVENTEENTH DAY OF OCTOBER. A.D. 2005.



Harriet Smith Windson, Secretary of State

AUTHENTICATION: 4544949

DATE: 02-23-06

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