# Divisin La Cons COO CV07/2007 13:28 #259 .001/202

### Florida Department of State

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HASSEE, FLC

LORIDA/FOREIGN LIMITED LIABILITY

#### AVP MIAMI BEACH LLC

Certificate of Status	0
Certified Copy	1
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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 A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1	AVP MIAMI BEACH LLC (Name of Foreign Limited Liability Company)		
2. (K	DELAWARE  urisdiction under the law of which foreign limited liability  unpany is organized)  (FEI number, if applicable)	•	
4	MARCH 6, 2007  5. PERPETLAL  (Date of Organization)  (Duration: Year limited liability company will cease to exist or "perpetual")	v.	
6	Upon find  (Date first transacted business in Florida, if prior to registration.)  (See sections 608.501 & 608.502 F.S. to determine penalty liability)	.07	
7	C/O Charles Group Hotels	MAR	
_	4333 Callins Ave. Miani Beach, Fla. 33140 25	4	
<b>8.</b> If	f limited liability company is a manager-managed company, check here	AM 9:	Ċ
9. T	he name and usual business addresses of the managing members or managers are as follows:	84:	
	ATLANTIC MIEW PARTHERS, LTD.	<u> </u>	
	Clo CHARLES GROUP HOTELS, 4333 COLLINS AVENUE	· ÷	
	MIAMI BEACH, FLORIDA 33140		
the jur	ttached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ation of the certificate under eath of the translator must be submitted.)	!	
11. N	Nature of business or purposes to be conducted or promoted in Florida:		

Signature of a member or an authorized representative of a member. (In accordance with section 603.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated berein are true.)

JAMES R. POMERANZ

Typed or printed name of signee

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# 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.

	MIAMI BEACH LLC		1 + + + ,				
2. The na	ume and the Florida street address	of the registered	agent and office are:	* * *: .		• • • • • • • • • • • • • • • • • • • •	
	,						
	National Cor	porate Research	i, Ltđ., Inc.				
		(Name)		<del></del>	•		
	515	East Park Avent	ue				
	Florida Stree: Addi	ress (P.O. Box NO	TACCEPTABLE)		₽ss	07	
					₽Ŝ	MAR	
	Tallahassee	FL	32301	<del></del> :	安里	20	
		City/State/Zip			ŠĘ. ŠĘ.	-7	
					_2		-ID
Having be	en named as registered agent and to	accept service	of process for the above	e stated limited	ESS FE	H	IJ
liability co	mpany at the place designated in th	is certificate, I h	ereby accept the appoin	ntment as registe	100 F		IJ
liability co agent and	mpany at the place designated in th agree to act in this capacity. I furth	is certificate, I h er agree to com	ereby accept the appoint	ntment as registe of all statutes	CF STATE FLORIDA		Ü
liability co agent and relating to	mpany at the place designated in th agree to act in this capacity. I furth the proper and complete performa	is certificate, I h er agree to comp ace of my duties,	ereby accept the appoi oly with the provisions and I am familiar with	ntment as registe of all statutes and accept the	OF STATE	AM 9:47	Ü
liability co agent and relating to	mpany at the place designated in th agree to act in this capacity. I furth	is certificate, I h er agree to comp ace of my duties,	ereby accept the appoi oly with the provisions and I am familiar with	ntment as registe of all statutes and accept the	CF STATE FLORIDA		Ü
liability co agent and relating to	mpany at the place designated in th agree to act in this capacity. I furth the proper and complete performa	is certificate, I h er agree to comp ace of my duties,	ereby accept the appoi oly with the provisions and I am familiar with	ntment as registe of all statutes and accept the	ACIĞIDA ELOĞIDLE ELOĞIDLE		Ð
liability co agent and relating to	mpany at the place designated in the agree to act in this capacity. I furthe the proper and complete performant of my position as registered agent.	is certificate, I h er agree to comp ace of my duties,	ereby accept the appoi oly with the provisions and I am familiar with	ntment as registe of all statutes and accept the	CF STATE FLORIDA		Ð
liability co agent and relating to obligations	mpany at the place designated in the agree to act in this capacity. I furth the proper and complete performant of my position as registered agent (Signature)	is certificate, I h ver agree to comp uce of my duties, as provided for t	ereby accept the appoi oly with the provisions and I am familiar with	ntment as registe of all statutes and accept the	FLONDA CF STATE		9
liability co agent and relating to obligations	mpany at the place designated in the agree to act in this capacity. I furth the proper and complete performant of my position as registered agent (Signature)	is certificate, I h er agree to comp ace of my duties,	ereby accept the appoi oly with the provisions and I am familiar with	ntment as registe of all statutes and accept the	FLONDIA CF STATE		ð

\$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

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# Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AVP MIAMI BEACH 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 SEVENTH DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVP MIAMI BEACH LLC" WAS FORMED ON THE SIXTH DAY OF MARCH, A.D. 2007.

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

07 MAR -7 AM 9: 48
SECRETURY OF STATE
TALLAH SESEE FLORING

4312130 , 8300 070288372



Warriet Smith Hindson

AUTHENTICATION: 5485227

DATE: 03-07-07

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