# 

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	isiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
ī				

Office Use Only



600095866316

04/05/07--01040--024 \*\*160.00

OT APR -5 PH 1:20

### **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJ	ECT: ReservHotel, LLC	Limited Liability Company)	
	•	• • • • • • • • • • • • • • • • • • • •	
Floric		Liability Company for Authorization to Transe submitted to register the above referenced fa	
Pleas	e return all correspondence concerning the	is matter to the following:	
	Jeffrey L. Cohen		
		(Name of Person)	
	Cohen, Cooper, Estep, and \	Whiteman	
		(Firm/Company)	O7 H
	3350 Riverwood Parkwa	y, Suite 2220	O7 APR -5
		(Address)	
	Atlanta, Georgia 30339		PH 1: 20
	(City	y/State and Zip Code)	0,
For fi	orther information concerning this matter,	please call:	
	Jeffrey L. Cohen	at ( 404 ) 814-0000	
	(Name of Person)	(Area Code & Daytime Telephone N	 Number)
	MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclo	sed is a check for the following amount:  \$\sum_\$125.00 \text{ Filing Fee} \square \frac{1}{2}\$130.00 \text{ Filing Fee} \text{ Certifical}		Fee, Certificate

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ReservHote	el, LLC		
·	(Name of Foreign Limited	Lia	ability Company)
Georgia		3.	20-3109126
(Jurisdiction u company is or	under the law of which foreign limited liability ganized)		(FEI number, if applicable)
October 1	11, 2005	5.	perpetual
	(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
April 2, 20	007		
	(Date first transacted business in F (See sections 608.501 & 608.502 F.S.)	lor S. t	ida, if prior to registration.) to determine penalty liability)
3363 N.E.	. 163rd Street, Suite 704		
North Mia	mi Beach, Florida 33160		<b>0</b> . 9V
	(Street Address	s o	f Principal Office)
. If limited l	liability company is a manager-managed	d c	company, check here
. The name	and usual business addresses of the man	na	ging members or managers are as follows: 🙎
Luis Barbe	eri		
3363 N.E	. 163rd Street, Suite 704		0
North Mia	ami Beach, Florida 33160		
ne jurisdiction un anslation of the	•	рy эт	hadal assamation souther
·		utl F.S	horized representative of a member. S., the execution of this document constitutes
	Jeffrey		Ohen
	Typed or printe	d:	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:	
Reserv	Hotel, LC	
2. The name an	nd the Florida street address of the registered agent and office are:	
	Luis E. Barberi	OT APR
	(Name)	- REST
	3363 NE 163 <sup>rd</sup> 54, #704 Florida Street Address (P.O. Box NOT ACCEPTABLE)	CORPORATIONS  5 PM 1: 20
	North Minmi BenehFL 33160	1: 20

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, Florida Statutes.

(Signature)

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

\$ 5.00 Certificate of Status (optional)

Control No. 0573574

# STATE OF GEORGIA

## Secretary of State

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

## CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

## RESERVHOTEL, LLC

#### **Domestic Limited Liability Company**

was formed or was authorized to transact business on 10/11/2005 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 30th day of March, 2007

Karen C Handel Secretary of State

Laure Handel

Certification Number: 1149792-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp