

Florida Department of State

Division of Corporations Public Access System

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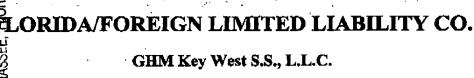
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608508, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO RECESIER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 GHM Key West S.S., L.L.C. (Name of Foreign Limited Liability Company) 2. DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 05/25/2007 (Dorntion: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. Upon Filing (Data first transacted business in Florids, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability) 1000 Market Street, Building One Portamouth, NH 03801 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 🗷 The name and usual business addresses of the managing members or managers are as follows: Sols Member/Manager: Global Hospitality Management LLC 1000 Market Street, Building One, Portsmouth, NH 03801 25 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Any and All Lawful Business Signature of a member or an authorized representative of a member.

(In accordance with section 508.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Richard C. Ade, Manager of Global Hospitality Management LLC

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.

The name an	d the Florida street address of the re	gistered agent and offi	ce are:		
	C T Corporati	on System			
	(Non	(0)			
	1200 South Pine	e Island Road			
	Florida Street Address (P.O.	Box NOT ACCEPTABLE)		Ç	,
	Plantation, Flo	 nida 33324		TAA	
	City/	State/Zip	• •	ં હ હ	. :
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ility compan at and agree	ned as registered agent and to accept u at the place designated in this certifi to act in this capacity. I further agree oper and complete performance of m position as registered agent as prove	icate, I hereby accept to e to comply with the pr y duties, and I am fami	he appointment as ovisions of all sta iliar with and acce	s registered; tutes ept the O	п
1.7		אורו לשנתחת. ואונילמד מענע		3.	F

Filing Fee for Application

Designation of Registered Agent Certified Copy (optional)

Certificate of Status (optional)

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\$ 100.00

\$ 25.00

\$ 30,00

5.00

Delaware

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBY CERTIFY "GRM KEY WEST S.S., L.L.C." 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-NINTH DAY OF MAI, A.D. 2007.

O7 MAY 31 AM

CRETARY OF STATE
SION OF CORPORATION

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Warriet Smile Hinson

Harriet Smith Windsor, Secretary of Sta

AUTHENTICATION: 5710243

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