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### ORIDA/FOREIGN LIMITED LIABILITY CO.

GHM Coral Springs, L.L.C.

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5/31/2007

## 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: 1. GHM Coral Springs, L.L.C. (Name of Foreign Limited Liability Company) 2. DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI member, if applicable) company is organized) 5. PERPETUAL (Dete of Organization) (Duration: Year limited liability company will cause to exist or "perpetual") 6. Upon Filing (Date first transacted brainess in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty itability) 7, 1000 Market Street, Building One Portsmouth, NH 03801 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: Sole Member/Manager: Global Hospitality Management LLC 1000 Market Street, Building One, Portsmouth, NH 03801 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having where the control 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 eath 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 608.40\$(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 POLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

E A REGISTERED OFFICE	E AND REGISTERED AC	BENT IN THE ST	ATE OF	
the Limited Liability Comp	any is:			
B, L.L.C.			·	
d the Florida street address	of the registered agent an	id office are:		
	(Name)			
1-1-			en Barrer en A	
Florida Street Add	iress (P.O. Box <u>NOT</u> ACCEPT	ABLE)		
Plan	<u> </u>	···	n en	•
	City/State/Zip		The first of the second of the	
at the place designated in to to det in this capacity. I furt oper and complete performa	his certificate, I hereby ac her agree to comply with t ince of my duties, and I an	cept the appointm the provisions of a n familiar with and	nent as registered all statutes d accept the	,
Peter F	Souza		26 TA	
(Signature) Assistent \$ 100.00 \$ 25.00 \$ 30.00	Filing Fee for Applica Designation of Regist	ered Agent 💎	PILED  OT MAY 31 AM II: 04  ECRETARY OF STATE  LLAHASSEE, FLORID,	
	the Limited Liability Composition as registered agent and it to dot in this capacity. I further position as registered agent (Signature) Assistant \$100.00 \$25.00	the Limited Liability Company is:  a, L.L.C.  I the Florida street address of the registered agent and CT Corporation System  (Name)  1200 South Pine Island Road  Florida Street Address (P.O. Box NOT ACCEPT  Plantation, Florida 33324  City/State/Zip  and as registered agent and to accept service of process at the place designated in this certificate, I hereby act to dot in this capacity. I further agree to comply with a position as registered agent as provided for in Chapta CT Corporation System  Peter F. Soura  (Signature) Assistant Secretary  \$ 100.00 Filing Fee for Applica \$ 25.00 Designation of Registered.	the Limited Liability Company is:  a, L.L.C.  If the Florida street address of the registered agent and office are:  CT Corporation System  (Name)  1200 South Pine Island Road  Florida Street Address (P.O. Box NOT ACCEPTABLE)  Plantation, Florida 33324  City/State/Zip  and as registered agent and to accept service of process for the above stat the place designated in this certificate, I hereby accept the appointment of det in this capacity. I further agree to comply with the provisions of a position as registered agent as provided for in Chapter 608, Florida State of CT Corporation System  Pater F. Souza  (Signature) Assistant Secretary	I the Florida street address of the registered agent and office are:  CT Corporation System  (Name)  1200 South Pine Island Road  Florida Street Address (P.O. Box NOT ACCEPTABLE)  Plantation, Florida 33324  City/State/Zip  The place designated in this certificate, I hereby accept the appointment as registered to dot in this capacity. I further agree to comply with the provisions of all stanties oper dud complete performance of my duties, and I am familiar with and accept the appointment as registered agent as provided for in Chapter 608, Florida Statutes.  CT Corporation System  Peter F. SOUZE  (Signature) Assistent Secretary

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# Delaware

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#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARS, DO BERSEY CERTIFY "GHM CORAL SPRINGS, L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND RAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-MINTH DAY OF MAY, A.D. 2007.

AND I DO BEREBY FURTHER CERTIFY THAT THE SAID "GUM CORAL SPRINGS, L.L.C." WAS FORMED ON THE TWENTY-FIFTH DAY OF MAY, A.D. 2007.

AND I DO BEREBY FORTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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