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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Corporex Select Servic	e Hotels, LLC ited Liability Company)
The enclosed "Application by Foreign Limited Lia	ability Company for Authorization to Transact Business in abmitted to register the above referenced foreign limited
Please return all correspondence concerning this n	natter to the following:
Heather Bradshaw	
(Na	me of Person)
Strauss & Troy	
(Fi	rm/Company)
50 E. RiverCenter Blvo	
	(Address)
Covington, KY 41011	
(City/St	ate and Zip Code)
For further information concerning this matter, ple	ase call:
Heather Bradshaw	_at (513) 768-9781
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sum_\$125.00 \text{ Filing Fee} \sum_\$130.00 \text{ Filing Fee & Certificate of}	\$155.00 Filing Fee & \$\sum \$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy

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. Corporex Select Service Hotels, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and atta consent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C.," "LLC.")	
_{2.} Kentucky 3.	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable	;)
4. April 6, 2005 5. Perpetual	
(Date of Organization) (Duration: Year limited liability comparexist or "perpetual")	y will cease to
6	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
100 E. RiverCenter Blvd., Suite 1100	
Covington, KY 41011	
(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 fo	
Corporex Realty & Investment, LLC 100 E. RiverCenter Blvd., Suite 1100, Coving	ton, KY 41011
	,,, <u>,</u>
	 .
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fore:	
translation of the certificate under oath of the translator must be submitted.)	ign kinguage, a
11. Nature of business or purposes to be conducted or promoted in Florida:	•
To construct and manage real estate.	- 20 =
Denstrante VDO	007 AUG 29 SECRETARY
Signature of a member or an authorized representative of a member.	VATA VATA S 300
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	[LLF aug.
Stephanie A. Dill	

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.

I The name of the Limited Liability Company is:

Corporex Select Service Hotels,LLC		
If name unavai	lable, the alternate name to be used in the state of Florida is:	
2. The name a	nd 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/FL/33324 FL City/State/Zip	

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 objections of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Carol Record- Asst. Socy

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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Commonwealth of Kentucky Trey Grayson Secretary of State

Certificate of Existence

I, Trey Grayson, Secretary of State of the Commonwealth of Kentucky, do hereby certify that according to the records in the Office of the Secretary of State,

CORPOREX SELECT SERVICE HOTELS, LLC

is a limited liability company duly organized and existing under KRS Chapter 275, whose date of organization is April 6, 2005.

I further certify that all fees and penalties owed to the Secretary of State have been paid; that articles of dissolution have not been filed; and that the most recent annual report required by KRS 275.190 has been delivered to the Secretary of State.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my Official Seal at Frankfort, Kentucky, this 23rd day of August, 2007.

Certificate Number: 52273

Jurisdiction: Strauss & Troy, LPA/ Pete A. Smith, Esq.

Visit http://apps.sos.ky.gov/business/obdb/certvalidate.aspx to validate the authenticity of this

certificate.



Trey Grayson Secretary of State Commonwealth of Kentucky 52273/0610387 2007 AUG 29 PM 3: 45
SECRETAR / OF STATE
TALLAHASSEE, FLORIDA