

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000248547 3)))



H070002485473ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA00000023 Phone

: (850)222-1092

Fax Number

: (850)878-5926

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Roberts Hotels Fort Myers, LLC Roberts Fort Myors, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

8202224912

10/5/2007 10/02/5007 15:17

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

IN COMPLIANCE WITH SECTION 604503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	Roberts Hotels Fort Myers, LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.")
COD	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writter sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability apany," "L.L.C.," "LLC.")
4.	Aissouri 3 26-0684787
(<u>)</u>	orisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	hine 28, 2007 Perpetual
•	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	O7
	(Date first transacted business in Florida, If prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7	1408 N. Kingshighway Bivd., Suits 300
	St. Louis, Missouri 63113
-	COURTE ACCUSES OF PRINCIPAL CURION ()
8. 1	f limited liability company is a manager-managed company, check here
9. 1	The name and usual business addresses of the managing members or managers are as follows:
	Staven C. Roberts, 1408 N. Kingshighway Blvd., Suite 300, St. Louis, Missouri 63113
	Michael V. Roberts, 1408 N. Kingshighway Blvd., Suite 300, St. Louis, Missouri 63113
neju mos	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in striction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a fracign language, a stion of the certificate under cath of the translator must be submitted.) 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 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.) Steven C. Roberts. Member
	Typed or printed name of signec

FL057 - 04/38/2007 C T Byeless Chiline

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 I	imited Liability Com	pany is:			
Roberts Hotels Fort Mye	rs, LLC				
If name unavailable,	the alternate name to l	be used in the state	e of Florida is:	TAL SE	07
2. The name and the	Florida street address	of the registered a	gent and office ar	CRE (AR LAHASS	0CT -5
	Ci	Corporation System		Ğ,≺ M.C.	32>= 17
<u></u>		(Name)		70	AM II:
	1200	South Pine Island Ros	a d		1: 28
	Florida Street Ade	tress (P.O. Box NOT	ACCEPTABLE)		
	Plantation	FL	33324		
		City/State/Zip			
liability company at the agent and agree to ac relating to the proper obligations of my post	s registered agent and a se place designated in t t in this capacity. I furn and complete performation as registered agen convention System	his certificate, I he her agree to compi ince of my duties, a	reby accept the ap ly with the provision and I am familiar v a Chapter 608, Flo	pointment as re ons of all statute with and accept t orida Statutes.	gistered s he
	(Signature)	John J.	Linnihan -	ASST. U.P	<u>'</u>

SI97225088 71:81 7005/20/61

PLUS7 - 06/22/2007 C T Syemm Quine

EXHIBIT A

To engage generally in the acquisition, financing, development, construction, operation, management, leasing and sale of hotels and real estate of every type and description, and to act as a holding or operating company for the ownership of hotels and real estate and all related and ancillary business and to acquire, own, finance, hold, develop, and operate hotels and real estate as operator, managing agent, principal, agent, partner, stockholder, syndicate member, associate, joint venturer, participant, or otherwise; to invest funds in and to raise funds to be invested in such business; and to do any and all things necessary or incident thereto;

To exercise all other powers necessary to or reasonably connected with the Company's business that may be legally exercised by limited liability companies under the Missouri Limited Liability Company Act and in accordance with Missouri law; and

In addition, the Company may engage in any and all activities necessary, customary, convenient, or incidental to any of the foregoing, or as otherwise permitted by Missouri and federal law.

07 OCT -5 AM II: 28
SECRETARY OF STATE

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

SECRETARY OF STATE

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

ROBERTS HOTELS FORT MYERS, LLC LC0826396

was created under the laws of this State on the 28th day of June, 2007, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 4th day of October, 2007

Robin Camalan

Secretary of State

Certification Number: 10128133-1 Reference: 3030-51
Verify this certificate online at http://www.sos.mo.gov/businessemity/verification

\$19.02/2008 \I:SI \LO02/50/01

CT CORP