# M07000006243

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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SECRETARY OF STATE
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ON SERVICE COMPANY.						
ACCOUNT NO. : 072100000032						
REFERENCE : 276698 4809148						
AUTHORIZATION: Complete Comments						
COST LIMIT : \$125.00						
ORDER DATE : October 17, 2007						
ORDER TIME: 12:05 PM						
ORDER NO. : 276698-010						
CUSTOMER NO: 4809148						
FOREIGN FILINGS						
NAME: EMBASSY SUITES MANAGEMENT LLC						
XXXX QUALIFICATION (TYPE: <u>LL</u> )						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						
CONTACT PERSON: Debbie Skipper EXT# 2948  EXAMINER:						
EAAMINER:						

### 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.	Embassy Suites Management LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
co	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writt nsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability impany," "L.L.C.," "LLC.")	<b>71</b>
2	Delaware 3, 26-1101036	
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4	09/19/2007 5 Perpetual PE 9	
7.	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6	Upon Filing San 8	ĩ
υ.	(See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	9338 Civic Center Drive	
	Beverly Hills, CA 90210	
	(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:	
	Please see Schedule A attached	
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records i jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a salation of the certificate under oath of the translator must be submitted.)	n
11	. Nature of business or purposes to be conducted or promoted in Florida: Hotel management business	
	K. alli anderia	
	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.)	
	K. Allen Anderson	

Typed or printed name of signee

Schedule A

#### Members of Embassy Suites Management LLC

Name of Member	Address
Promus Hotels Florida, Inc., a Delaware corporation	9336 Civic Center Drive Beverly Hills, CA 90210
Promus Hotels, Inc., a Delaware corporation	9336 Civic Center Drive Beverly Hills, CA 90210

## 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	of the Limited Liability	Company is:			
Embassy Suite	s Management LLC				
If name unava	ilable, the alternate nar	ne to be used in the state of Florida is:			
2. The name a	and the Florida street ac	dress of the registered agent and office are:			
	Corporation Service Company				
		(Name)			
	1201 Hays Street				
Florida Street Address (P.O. Box NOT ACCEPTABLE)					
	Tallahassee	FL 32301			
		City/State/Zip			
liability compa agent and agre relating to the j	my at the place designate ee to act in this capacity. proper and complete pe my position as registere.	t and to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as registered I further agree to comply with the provisions of all statutes formance of my duties, and I am familiar with and accept the lagent as provided for in Chapter 608, Florida Statutes.			

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

PAGE 1

# Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EMBASSY SUITES MANAGEMENT LLC" 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 SEVENTEENTH DAY OF OCTOBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "EMBASSY SUITES MANAGEMENT LLC" WAS FORMED ON THE NINETEENTH DAY OF SEPTEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Harriet Smith Windsor Speretary of State

AUTHENTICATION: 6083293

DATE: 10-17-07

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