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EXAMINER

COVER LETTER	CO	VE	\mathbf{R}	$\mathbf{L}\mathbf{E}$	TT	\mathbf{E}	R
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TO: Registration Section Division of Corporations	
SUBJECT: Lake Wales Hospitality I LL	_C Liability Company)
(Name of Limited	Liability Company)
The enclosed "Application by Foreign Limited Liability Florida," Certificate of Existence, and check are submitted liability company to transact business in Florida	
Please return all correspondence concerning this matte	er to the following:
S. Vern Hakes	
· (Name	of Person)
Vanguard Associates, Inc.	
(Firm/C	Company)
1900 The Exchange, Suite	e 180
(Ad	idress) $S_{S_{\infty}}^{\infty}$
•	
Atlanta, GA 30339	<u> </u>
(City/State a	and Zip Code) 용류 설득
For further information concerning this matter, please	call:
Vern Hakes	_{at (} 770 ₎ 955-7709
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: S'	TREET ADDRESS:
Division of Corporations D	Pivision of Corporations
•	Clifton Building
*	661 Executive Center Circle fallahassee, FL 32301
	\$155.00 Filing Fee & \$\sum \$160.00 Filing Fee, Certificate
· Certificate of Stat	tus Certified Copy of Status & Certified Copy

APPLICATION BY FÓREIGN 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. Lake Wales Hospitality I LLC			
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L	.C.," or "LLC	J.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and consent of the managers or managing members adopting the alternate name. The alternate name must in Company," "L.L.C.," "LLC.")			
_{2.} Georgia _{3.} 26-1806332			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicompany is organized)	cable)		
4. 1/23/2008 5. Perpetual			
(Date of Organization) (Date of Organization) (Duration: Year limited liability coexist or "perpetual")	mpany will o	ease to	,
6	SE	80	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	AH.	EB	
_{7.} 1900 The Exchange, Suite 180	ARY ASS	2	T
Atlanta, GA 30339	M _S	PK	M
(Street Address of Principal Office)	STATE	3: 21	
8. If limited liability company is a manager-managed company, check here 🗸	DA A	F	
9. The name and usual business addresses of the managing members or managers are	as follows:		
Timothy J. O'Neill, Jr.	as follows.		
1900 The Exchange, Suite 180 Atlanta, GA 30339			
· · · · · · · · · · · · · · · · · · ·			
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a state of the certificate is in a state of the certificate in the certificate is in a state of the certificate in the certificate is in a state of the certificate in the certificate is in a state of the certificate in the certificate is in a state of the certificate in the cer	•	-	
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: Hotel	develo	ome	nt —
			•
Signature of a member or an authorized representative of a mem			
(In accordance with section 608.408(3), F.S., the execution of this document constituent an affirmation under the penalties of perjury that the facts stated herein are true.)	tes		
Timothy J. O'Neill, Jr.			

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.

1. The name of the Limited Liability Company is:			
Lake Wales Hospitality I LLC			
If name unavailable, the alternate name to be used in the state of Florida is:			
2. The name and the Florida street address of the registered agent and office are:	TALL	180	
William S. Battillo	CRETAI	FEB 2	
(Name)	ASS	2	C. N. Land
23318 Oak Prairie Circle	Y OF S	PH	177
Florida Street Address (P.O. Box NOT ACCEPTABLE)	TATE ORID	ယ္	O
Sorrento 32776 FL City/State/Zip	Ď.F	t-	

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

(Signature)

\$ 1	00.00	Filing Fee for Application
\$	25.00	Designation of Registered Agent
\$	30.00	Certified Copy (optional)
2	5.00	Certificate of Status (ontional)

Control No. 08006227

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state hereby certify under the seal of my office that

LAKE WALES HOSPITALITY I LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 01/23/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 19th day of February, 2008

Karen C Handel Secretary of State

Laun C. Handel

Certification Number: 2077945-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp