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(Re	equestor's Name)	
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PłCK-UP	WAIT	MAIL
(Bu	siness Entity Name)	
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE TALLAHASSEE, FLORID

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T. CLINE

APR - 8 2008

EXAMINER



March 25, 2008

JACQUELINE PETERSON 1635 OLD 41 HIGHWAY NW SUITES 212-313 KENNESAW, GA 30152

SUBJECT: HOSPITALITY RENOVATIONS LLC

Ref. Number: W08000015320

We have received your document for HOSPITALITY RENOVATIONS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as for it is not distinguishable from the name of an existing entity. Section 608 2005, Florida Statutes, was amended effective July 1, 2007, to require the name of limited liability company to be distinguishable from the names of all other fillings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L07000000442.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 008A00017656

Division of Corporations PO ROY 6327 Tollahasson Florida 32214

COVER LETTER

TO: Registration Section

Division of	of Corporations	
SUBJECT:	LOSPITAUTY	PENOVATIONS LIC
	(Name	ne of Limited Liability Company)
Florida," Certific		mited Liability Company for Authorization to Transact Business in eck are submitted to register the above referenced foreign limited Florida.
Please return all o	correspondence concernia	ing this matter to the following:
	JACQUEL	IME G. PETERSON
		(Name of Person)
	HOGATAUT	TY PPONOVATIONS LICES IS TO THE PROPERTY OF TH
		(Firm/Company)
	1025 OU	(Firm/Company) OUITED APR APR APR APR APR APR APR AP
		(Address)
	KENNES	AW, GA 30152 3 5
		(City/State and Zip Code)
For further inform	nation concerning this ma	natter, please call:
JACQUE	(Name of Person)	at (770) 880-6507 (Area Code & Daytime Telephone Number)
Division of P.O. Box	G ADDRESS: of Corporations 6327 ee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a che		

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:

. Hog	PATAUTY Foreign Limited Liability	PENOVATION ty Company; must include	SNG LLC	many ""I I C " or	«IIC»
		PITALITY PE			ĻLC.)
f name unavaile	able, enter alternate name	e adopted for the purpose embers adopting the altern	of transacting business i	n Florida and attach	
GROOM	REIA	3.	(FEI num	4-918-8	
(Jurisdiction us company is org	nder the law of which for ganized)	oreign limited liability	(FEI nun	ber, if applicable)	
13/1	(Date of Organization)	5.	PERPR	NAL	
·	(Date of Organization)		(Duration: Year limite exist or "perpetual")	d liability company	
HOT	APPLICA F	31F=		ì	2008 1 SEC
•	(Date first to (See sections	ansacted business in Flori 608.501 & 608.502 F.S. to	da, if prior to registration o determine penalty liabi	n.) lity)	>2 ≥
162	5 OLD 41	HIGHWAY	NW SUTT	PS 212-	第3
KEN	INBODUL,	GEORGIA	30152	-	R-JAMIO
	·	(Street Address of	Principal Office)		200 F
. The name a	and usual business a	a manager-managed conditions of the managed conditions of the		nagers are as follo	ows: Frakrodw, CP 30152
JOHN	CLARK-	Years o	24741 HWY HV		KANNEGAN, GA 3015Z
DPAT	PUILDERE,	· IOTI V	nbel heem	PD.91.350	POSEMONT, 12 GOODS
ejurisdiction un anslation of the	nder the law of which it is certificate under oath of t	istence, no more than 90 da organized. (A photocopy ine translator must be submit s to be conducted or p	s not acceptable. If the ce tted.)	rtificate is in a foreign	n language, a
	ATION OF		nonotos m i nones.		
	Signature	f a member of an auth with section 608.408(3), F.S.	orized representative	e of a member.	•

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:	
LOSPITAUTY REMOVATIONS WC	
If name unavailable, the alternate name to be used in the state of Florida is:	
HOSPITAUTY PRENOVATIONS L.L.C. So	2008
2. The name and the Florida street address of the registered agent and office are:	APR -7
MRAI GERVICES INC.	
(Name)	
2731 PYREWINE PARK DRIVE SUITE 4	AN 10: 16
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
WP205TON FL 33331 City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated limit liability company at the place designated in this certificate, I hereby accept the appointment as reagent and agree to act in this capacity. I further agree to comply with the provisions of all statute relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. Catherine Bothelli, Asstruct New Signature)	gistered es the
\$ 100.00 Filing Fee for Application	
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)	
\$ 5.00 Certificate of Status (optional)	

Control No. 07038637

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 of Georgia, hereby certify under the seal of my office that

HOSPITALITY RENOVATIONS LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 05/07/2007 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 20th day of March, 2008

Karen C Handel Secretary of State

Haun CHandel

Certification Number: 2396393-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp