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O9 MAR 18 AM 10: 36
SECRETARY OF STATE

D. BRUCE

MAR 18 2009

**EXAMINER** 

#### **COVER LETTER**

Registration Section
Division of Corporations

TO:

SUBJECT: FelCor/CSS (SPE), L.L.C. (Name of Limit	ted Liability Company)			
	bility Company for Authorization to Transact Business in bmitted to register the above referenced foreign limited			
Please return all correspondence concerning this ma	atter to the following:			
Ana Moreira				
(Name of Person)				
FelCor Lodging Trust Incor	porated			
(Firm/Company)				
545 E. John Carpenter Frwy., Suite 1300				
	(Address)			
Irving, Texas 75062	te and Zip Code)  ALLAHAR  ALLAHAR  SECRETAR  ALLAHAR  AL			
(City/Sta	te and Zip Code)			
For further information concerning this matter, plea	· π-<			
Ana Moreira	_at (972 ) 444-4144			
(Name of Person)	(Area Code & Daytime Telephone Number)			
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 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 \$\frac{1}{2}\$}	\$155.00 Filing Fee & \$\Bigsim \$160.00 Filing Fee, Certificate  Status Certified Copy of Status & Certified Copy			



### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2009

ANA MOREIRA FELCORLODGING TRUST INC 545 E JOHN CARPENTER FRWY., SUITE 1300 IRVING, TX 75062

SUBJECT: FELCOR/CSS (SPE), L.L.C.

Ref. Number: W09000012525

We have received your document for FELCOR/CSS (SPE), L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 909A00009017

O9 MAR 18 AM 10: 36
SECRETARY OF STATE



ANA C. MOREIRA EXECUTIVE LEGAL ASSISTANT 545 E. JOHN CARPENTER FREEWAY, SUITE 1300

IRVING, TEXAS 75062 PH: 972-444-4144

F: 972-444-4195 amoreira@felcor.com

NYSE: FCH

March 13, 2009

Florida Secretary of State Attn: Division of Corporations

RE: Application by Foreign LLC for Authorization to Transact Business in Florida for FelCor/CSS (SPE), L.L.C.

Dear Sir or Madam:

Please see all attached. I need this filed ASAP and proof of filing sent back to me via overnight courier and/or emailed to me.

My fed-ex account number for returning my proof of filing is 159066037. If you can pdf and email to me the filing proof, my email address is amoreira@felcor.com.

Please contact me immediately with any questions regarding this filing as timing for this is very tight for us. Thank you for your assistance with this matter.

Best regards,

Ana C. Moreira

09 MAR 18 AM 10: 36

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

LIA	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1.	FelCor/CSS (SPE), L.L.C.  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
	,	
cor	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the assent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabil mpany," "L.L.C.," "LLC.")	
2.	Delaware 3. 75-2544994	
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	1
4.		
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	•
6.	n/a	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	545 E. John Carpenter Frwy., Suite 1300	
	Irving, Texas 75062	
	(Street Address of Principal Office)	•
8.	If limited liability company is a manager-managed company, check here	<b>-</b>
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Richard A. Smith 545 E. John Carpenter Frwy., Suite 1300, Irving, Texas 75062	
	Andrew J. Welch 545 E. John Carpenter Frwy., Suite 1300, Irving, Texas 75062	
	Jonathan H. Yeilen  545 E. John Carpenter Frwy. Suite 1300, Irving. Texas 75062	
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recijurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under eath of the translator must be submitted.)	ords in
11.	. Nature of business or purposes to be conducted or promoted in Florida: Hospitality	
	A A	•
	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.)	
	Jonathan H. Yellen	
	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:		
FelCor/CSS (SPE), L.L.C.		-
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:	<u></u>	-
CT Corporation System (Name)	09 MAR 18 SECRETAR ALLAHASS	
1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)		<u>'</u>
Plantation, FL 33324 FL City/State/Zip	STATE FLORIDA	

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)

Michael E. Jonos

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "FELCOR/CSS (SPE), L.L.C." 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 TENTH DAY OF MARCH, A.D. 2009.

09 MAR 18 AM 10: 36
SECRETARY OF STATE

4661201 8300

090246689

AUTHENTICATION: 7176311

DATE: 03-10-09

You may verify this certificate online at corp.delaware.gov/authver.shtml