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SECRETARY OF STATE

C. LEWIS
FEB 24 2010
EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 22, 2010

HANNA KARCHO / VILLA CAPRICE HOTEL MANAGEMENT, LLC 55 E. LONG LAKE RD. #204 TROY, MI 48085-4738

SUBJECT: VILLA CAPRICE HOTEL MANAGEMENT, LLC

Ref. Number: W10000008887

We have received your document for VILLA CAPRICE HOTEL MANAGEMENT, LLC and your check(s) totaling \$650.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 710A00004358

COVER LETTER

TO.

TÓ:	Registration Section Division of Corporations			
SUBJE	Name of Limited Liability Company			
The encl	osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please re	eturn all correspondence concerning this matter to the following:			
	Hanna Karcho			
	Name of Person			
Villa Caprice Hotel Management, LLC				
Firm/Company				
	55 E. Long Lake Road, #204			
	Address			
Troy, Michigan 48085-4738				
City/State and Zip Code				
	hkarcho@yahoo.com E-mail address: (to be used for future annual report notification)			
For furth	er information concerning this matter, please call:			
	Hanna Karchoat (248)645-5400			
	Name of Person Area Code & Daytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclose [d is a check for the following amount: \$\int\\$125.00\ \text{Filing Fee} \int\\$130.00\ \text{Filing Fee} \int\\$\$ \$\int\\$\$155.00\ \text{Filing Fee} \int\\$\$ \$\int\\$			
	Certificate of Status Certified Copy of Status & Certified Copy			

ÀPPLICATION 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: Villa Caprice Hotel Management, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.") Michigan 32-0301593 (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 2/10/10 15 vears (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 7. 55 E. Long Lake Road, #204 Troy, Michigan 48085-4738 (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 Hanna Karcho, Managing Member 55 E. Long Lake Road, #204 Troy, MI 48085-4738 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a 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: Own and manage real estate Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), E.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Hanna Karcho, Managing 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.

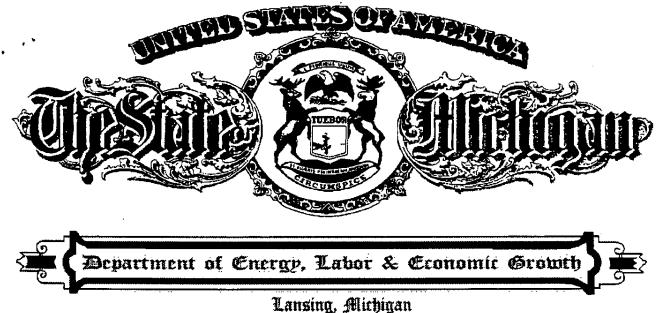
1. The name of the Limited Liability Company is:	
Villa Caprice Hotel Management, LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Fiorida street address of the registered agent and office are:	
Eunice Gallets	1 2
(Name)	FIN 2010 FEB TALLAH
2825 SW 22nd Street, Suite #105	是
Florida Street Address (P.O. Box NOT ACCEPTABLE)	23 P
Delway Beach FL 33445	FS E
City/State/Zip	W 4: 01 E. FLORIDA
Having been named as registered agent and to accept service of process for the above sta- liability company at the place designated in this certificate, I hereby accept the appointment	

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)

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



Laubuy, Mugga

This is to Certify That

VILLA CAPRICE HOTEL MANAGEMENT, LLC

was validly organized on February 10, 2010 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in $g \infty d$ standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission
D3871J

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 10th day of February, 2010

Bureau of Commercial Services