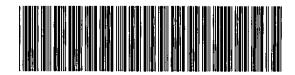
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(Requestor's Name)
,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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B. KOHR FEB 1 8 2011

**EXAMINER** 



ACCOUNT NO. : I2000000195 REFERENCE : AUTHORIZATION COST LIMIT : ORDER DATE: February 16, 2011 ORDER TIME : 1:23 PM ORDER NO. : 677710-010 CUSTOMER NO: 7250935 FOREIGN FILINGS NAME: DOMINION HOTEL I, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY

EXAMINER:

CONTACT PERSON: Troy Todd -- EXT# 2940

### 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. DOMINION HOTEL I, 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 w consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	ritten Y
2. Delaware 3. 27-5014082	•
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. 02162011 5. Perpetual	
	PINIS
6	\$
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	JA PH 3: 0
7. 8910 University Center Lane, Suite 100	P
San Diego, CA 92122	ب
(Street Address of Principal Office)	90
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:	
Masood Tayebi, 8910 University Center Lane, Suite 100, San Diego, CA 92122	
Michael Soni, 8910 University Center Lane, Suite 100, San Diego, CA 92122	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record 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 eath of the translator must be submitted.)	ds in
11. Nature of business or purposes to be conducted or promoted in Florida: Hotel Investment	
m	
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	
Michael Soni	

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 L	imited Liability Con	npany is:	
DOMINION HOTEI	. I, LLC		
If unavailable, the alt	ernate to be used in	the state of Florida is:	
Dominion Hotel Inve	stment, LLC		
2. The name and the	Florida street addres	ss of the registered agent and office are:	
Corpo	oration Service Com	pany	
		(Name)	
1201	Hays Street		
	Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)	
Talia	hassee	FL 32301	
		City/State/Zip	
<u>Talla</u>	hassee	112	

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.

Corporation Service Company

Troy Todd
as its agent

(Signature)

\$ 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 "DOMINION HOTEL I, 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 SIXTEENTH DAY OF FEBRUARY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DOMINION HOTEL I, LLC" WAS FORMED ON THE SIXTEENTH DAY OF FEBRUARY, A.D. 2011.

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

4941296 8300

110167769

AUTHENTICATION: 8565217

DATE: 02-16-11

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