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DEPARTMENT OF STATE OF VISION OF CORPORATION OF CORPORATION OF CORPORATION OF THE TOTAL PROPERTY OF TOTAL PROPERTY OF THE TOTAL PROPERTY OF TOTAL PROPERTY OF THE TOTAL PROPERTY

DIVISION OF CONFORATION

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET ACCT. #FCA-14 CONTACT: **RICKY SOTO** DATE: 07/25/2011 **REF. #:** 001495.151704 CORP. NAME: SOUTH BEACH HOSPITALITY LLC () ARTICLES OF DISSOLUTION () ARTICLES OF INCORPORATION () ARTICLES OF AMENDMENT () TRADEMARK/SERVICE MARK () FICTITIOUS NAME () ANNUAL REPORT () LIMITED PARTNERSHIP () LIMITED LIABILITY (XX) FOREIGN QUALIFICATION () MERGER () WITHDRAWAL () REINSTATEMENT () CERTIFICATE OF CANCELLATION () OTHER: STATE FEES PREPAID WITH CHECK# 540795 FOR \$ 155.00 AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: COST LIMIT: \$____

PLEASE RETURN:

(XX) CERTIFIED COPY

() CERTIFICATE OF GOOD STANDING () PLAIN STAMPED COPY

() CERTIFICATE OF STATUS

Examiner's Initials

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 BY SINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. South Beach Hospitality 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 writt consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Delaware 3. 45-2810652
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. June 1, 2011 5. perpetual (Date of Organization) 5. Duration: Year limited liability company will cease to exist or "perpetual")
6. August 1, 2011
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. c/o Green Apple Group, 380 Lafayette Street, Suite 205, New York, NY 10003
(Street Address of Principal Office)
(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:
Third Court Partners LLC, Managing Member
c/o Green Apple Group
380 Lafayette Street, Suite 205, New York, NY 10003
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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: Operation of a
restaurant and provision of food and beverage/services in a hotel.
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.)

Typed or printed name of signee

Joshua Pickard, as Managing Member of Third Court Partners LLC

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.

Company is:	
LLC	
l in the state of Florida is:	
dress of the registered agent and office are:	
Services, Inc.	
(Name)	
eland Blvd., Suite 508	
eet Address (P.O. Box NOT ACCEPTABLE)	
_{FL} 33156	
City/State/Zip	
	cin the state of Florida is: dress of the registered agent and office are: Services, Inc. (Name) Pland Blvd., Suite 508 Pet Address (P.O. Box NOT ACCEPTABLE) FL 33156

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.

Medul L. Barrel

\$ 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

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "SOUTH BEACH HOSPITALITY 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 TWENTY-SECOND DAY OF JULY, A.D.
2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTH BEACH HOSPITALITY LLC" WAS FORMED ON THE FIRST DAY OF JUNE, A.D. 2011.

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

4990576 8300

110850495

AUTHENTY CATION: 8921371

DATE: 07-22-11

at corp.delaware.gov/authver.shtml