epartment of State

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Foreign Limited Liability Company Melia Hotels USA, LLC

Certificate of Status	0
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COVER LETTER

SUIMECT: "	ELIA HOTELS USAJLLC	Name of Limited Liability Company	
		• • • •	
The enclosed */ Existence, and (Application by Foreign Limited L check are submitted to register th	iability Company for Authorization to Transact Business in Florida." C	Certificate of ss in Florid
	correspondence concerning this		
	ILSE BAROUDI		
		Name of Person	
		Pirm/Company	
	800 BRICKELL AVE SUITE	1000	
		Address	
	MIAMI FL 33131		
		City/State and Zip Code	
	ILSEB@SOL-OROUP.COM		
	E-mail address	e: (to be used for future annual report notification)	
For further info	mation concerning this matter, p	lesse call:	
ILSE B	AROUDI	at (305 9295105	
	Name of Person	Area Code & Daytime Telephone Number	
Divisio Registr P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee. FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	
9 H118118	check for the following am	Tallahassee, FL 32301	

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

IN COMPLIANCE WITH SECTION GORSON, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY COMPANT TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 MELIA HOTELS USALLC	WED IN THE SIDE OF TOXAGE.
(Name of Foreign Limited Liability Comp	eany; must include "Limited Liability Company," "L.U.C.," or "LLC.")
(if name unitvaliable, enter alternate name adopte consent of the managers of managing members as Compuny," "L.L.C," "L.C,")	d for the purpose of transacting business in Florida and attach a copy of the write topding the alternate name. The alternate name must include "Limited Liability
2. DELAWARE	3. 80-0752312
(Jurisdiction under the law of which foreign lin company is organized)	
1 08/25/2011	5 PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
UPON REGISTRATION	
(Date first transacted (See sections 608.301 a	business in Florida, If prior to registration.) & 608.502 F.S. to determine penulty liability)
800 BRICKELL AVENUE SUITE 1000 MIA	MI FL 3313)
. (5	Street Address of Principal Office)
. If limited liability company is a manag	er-managed company, check here
. The name and usual business addresses	s of the managing members or managers are as follows:
PILAR DOLS, ALVARO TEJEDA, EDUAR	DO AGUILAR
800 BRICKELL AVE SUITE 1000 MIAMI F	7L33131
	Thore than 90 days old, duly authenticated by the official having custody of records in 1. (A photocopy is not acceptable. If the certificate is in a fixeign language, a or must be submitted.)
Nature of business or purposes to be c	onducted or promoted in Florida: HOLDING COMPANY
	1
Signature of a memb	ber or an authorized representative of a member.
penalties of perjury that the faces state	i, F.S., the execution of this document constitutes an affirmation under the adherein are true. I am aware that any false information submitted in a ate constitutes a third degree felony as provided for in s.817.155, F.S.) RG S.A.
Туре	d or printed name of signes
	• • •

PROST - 1846.2010 C ESpains Sulb

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:

If unavailab	If unavailable, the alternate to be used in the state of Florida is:					
2. The nam	e and the Florida street address	s of the registered agent and office are:				
	C T Corporation System					
		(Name)				
	1200 South Pine Island Road					
	Florida Street Ac	ddross (P.O. Box NOT ACCEPTABLE)				
	Plantation	FL 33324				
		City/State/Zip				
liability com agent and ag relating to th	pany at the place designated in tree to act in this capacity. I fut the proper and complete perform of my position as registered age CT Corporation Systems. By:	to accept service of process for the above stated limited this certificate, I hereby accept the appointment as registered rther agree to comply with the provisions of all statutes mance of my duties, and I am familiar with and accept the mit as provided for in Chapter 608, Florida Statutes, Madonna Cuddihy Special Assistant Secreta				
	\$ 100.00 \$ 25.00					
	\$ 25.00 \$ 30.00					

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HERBY CERTIFY "MELIA HOTELS USA, 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 PIRST DAY OF SEPTEMBER, A.D. 2011.

AND I DO BEREBY FURTHER CERTIFY THAT THE SAID "MELIA HOTELS USA, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF AUGUST, A.D. 2011.

AND I DO HERBBY PURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5029845 8300

110973449

You may verify this certificate online at corp. delegare gov/authors. shiel

Jeffrey W. Bullock, Secretary of State

DATE: 09-01-11