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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: VCORP SERVICES, LLC

Account Number : I20080000067

Phone Fax Number : (845)425-0077 : (845)818-3588

**Enter the email address for this business entity to be used for fund annual report mailings. Enter only one email address please.*

Email Address:

Foreign Limited Liability Company Thompson Ocean Drive Associates, LLC

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\$155,00

Electronic Filing Menu

Corporate Filing Menu

Help

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:

IMITED LIABILITY COL	MPANY TO TRANSACT BUSIN	TESS IN THE S	TATE OF FLORI	DA:		
THOMPSON OCEA	NN DRIVE ASSOCIATES, I	LC				
(Name of Foreign	n Limited Liability Company	; must includ	e "Limited Liabi	lity Company," "L.L.C	2.," or "LLC.")	
name unavailable, en usent of the managers mpany.""L.L.C," "L	tter afternate name adopted fit or managing members adop LC.")	or the purpose ting the altern	of transacting bate name. The al	usiness in Florida and ternate name must inc	artich a copy of the lude "Limited Linb	_ o writt ility
DELAWARE		3.	N/A .			
Jurisdiction under the company is organized	e law of which foreign limite)	d liability	(F	El number, il applica	ble)	-
July 13	201(Organization)	5.	PERPETUAL			
(Date o) Organization)	_	(Duration: Yes	ar limited liability com cual")	ipany will cease to	-
	(Date first transacted bus (See sections 608,501 & 6	_	do, if prior to reg determine pena	istration.) Ity liability)		-
54 TI	hompson Street	5th Floor				_
New Y	fork, NY 10012				ALL SE	2
	(Stre	el Address of	Principal Office)	£R £R	¥
If limited liability	company is a manager-	managed co	ompany, check	k here	TARY ASSE	SEP 14
The name and usu	nal business addresses of	the manug	ing members (or managers are as	follows:	A
Thompson Hotels, Ll	LC, a Delaware limited liabil	ity company,	its sole member		22	ά
54 Thompson Street,	, 5th Floor, New York, NY	0012			DA TE	20
jurisdiction under the la	certificate of existence, no mo nw of which it is organized. (/ e under call) of the translator m	photocopy is	not acceptable. It			oxus in
Nature of busines	ss or purposes to be con-	ducted or pr	omated in Fla	orida:	w	
danagement and open	ations					
	Signature of a member	or an autho	rized represen	itative of a membe	r.	
penalties o	ince with section 608,408(3), F.S of perjury that the facts stated he tate the Department of State	rein are trué. I	aware that ar	ny false information su	bmitted in a	
	Daniel L. Brown		me of signee		-	
	heu o	-bunna us	me or gighter			

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.

	the Limited Liability Compar Ocean Drive Assoc	_			
If unavailable, th	ne alternate to be used in the s	state of Florida is:			
2. The name and	i the Fiorida street address of	f the registered agent and offic	е аге:		
<u>'</u>	Vcorp Services, LLC	(Name)		2011 SEP	-1 7
Ę	5011 South State Road Florida Street Addre	d 7, Suite 106 ss (P.O. Box <u>NOT</u> ACCEPTABLE)	55te, FL	- F	ī
	Davie	FL 33314 City/State/Zip	ORIDA	AM 8: 20	En P

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)



No. 2020 March March Page 1 Control of the Control

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "THOMPSON OCEAN DRIVE ASSOCIATES, 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 FOURTEENTH DAY OF SEPTEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "THOMPSON OCEAN DRIVE ASSOCIATES, LLC" WAS FORMED ON THE THIRTEENTH DAY OF JULY, A.D. 2011.

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

5010248 8300

111004669

AUTHENTACATION: 9027156

DATE: 09-14-11

Jeffrey W. Bullock, Secretary of State

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