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Account Name Account Number : 120020000094

: TRIAD PROFESSIONAL SERVICES,

: (770)777-2091

Phone

Fax Number

: (770)220-1943

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#### Foreign Limited Liability Company Sydell Hostel Manager LLC

Certificate of Status	0
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**EXAMINER** 

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TO:

Registration Section

#### COVER LETTER

DIAIRION OF COLDOLUTIONS
SUBJECT: SYDELL HOSTEL MANAGER LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Sharon K. Gray
Nume of Person
Triad Professional Services, LLC

Triad Professional Services, LLC

Firm/Company

1720 Windward Concourse, Ste. 390

Address

Alpharetta, GA 30005

City/State and Zip Code

| Daden@triadpros.com | E-mail address: (to be used for future annual report notification) | Date | D

Name of Person Area Code & Daytime Telephon

MAILING ADDRESS: STREET ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327

Area Code & Daytime Telephon

Circulation of Corporations

Registration Section

Circulation Building

P.Ö. Box 6327

Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the	ne following amount:		
\$125,00 Filing Fcc	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy	of Status & Certified Copy

## 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:

1. SYDELL HOSTEL MANAGER LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"		<del></del>
(Name of Foreign Lamited 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 Plorida and attaconsent of the unavagers or managing members adopting the alternate name, The alternate name must include Company," "L.L.C," "LLC,")	ch a copy of "Limited Li	the swritten ability
2. Delaware (Jurisdiction under the law of which foreign limited liability (PEI number, if applicable)		
company is organized) (FEI number, it applicable)	,	
4. 12/14/2011 5. Perpetual		-
(Date of Organization) (Duration: Year limited liability compare exist or "perpetual")	iy Will cease	10
6. Upon qualification		
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	e-A.	15-3
7. 41 Madison Avenue, 25th Ffr.	<b>建</b> 第	
New York, NY 10010	*2	Inecl22
(Street Address of Principal Office)	- 15 Th	122
8. If limited liability company is a manager-managed company, check here	E C	整
9. The name and usual business addresses of the managing members or managers are as fo	Iloves III	565 1880
	313	T
Sydell Hostels LLC	********	
41 Madison Avenue, 25th Flr.		·
New York, NY 10010		
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official havistic jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreignalation of the certificate under eath of the translator must be submitted.)	ng custody of Ign language,	frecords in a
11. Nature of business or purposes to be conducted or promoted in Florida:		
Real estate ownership.		<b></b> ,
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 a penalties of perjury that the facts stated herein are true. I am aware that any false information subm	nitted in n	
document to the Department of State constitutes a third degree felony as provided for in \$.81  Joshua Babbitt	7.155, F.S.)	
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.

I. The name of the Limited Liability Com SYDELL HOSTEL MANAGE	•		
If unavailable, the alternate to be used in the	ne state of Florida is:		
2. The name and the Florida street address	s of the registered agent and office are:	<u> </u>	
NRAI Services, Inc.		Y.	
515 East Park Avenu	(Name)	NE TA	I DEC 22
Florida Street Ad	Idross (P.O. Box NOT ACCEPTABLE)	SEE, FL	哥
าสแสกสรรยย	City/State/Zip	TATE	<b>₩</b>
Having been named as registered agent and liability company at the place designated in agent and agree to act in this capacity. I fur relating to the proper and complete perform obligations of my position as registered agen NRAI Services, inc.  By:  (Sign Sharon K. Gray, Assistant & \$100.00 \$25.00 \$30.00 \$5.00	this certificate, I hereby accept the appointmenter agree to comply with the provisions of ance of my duties, and I am familiar with an ance of my duties, and I am familiar with an areas provided for in Chapter 608, Florida Stanture)  Secretary  Filing Fee for Application Designation of Registered Agent Certified Copy (optional)	ent as reg ill statute d accept t	gistered S

# Delaware

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SYDELL HOSTEL MANAGER 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 SEVENTEENTH DAY OF DECEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SYDELL HOSTEL MANAGER LLC" WAS FORMED ON THE FOURTEENTH DAY OF DECEMBER, A.D. 2011.

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

5080173

111292506

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

TION: 9236638

DATE: 12-17-11

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