

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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Foreign Limited Liability Company Omega Hospitality LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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EXAMINER

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COVER LETTER

SUBJECT:	Omega Hospitality L	LC			
SCIMECT.		Name of Limited Liability Company			
The enclose Existence, a	d "Application by Foreign Limited l nd check are submitted to register th	Liability Company for Authorization to Transact Business no above referenced foreign limited liability company to t	s in Florida," ransact busine	Certific ess in Fl	ate of lorida
Please return	n all correspondence concerning this	s matter to the following:			
	Peter A. Schoemann,	P.A.			
•		Name of Person			
	Broad and Cassel				
	<u> </u>	Firm/Company			
	390 North Orange Av	venue, Suite 1400			
		Address -			
	Orlando, Florida 3280		200	2012	
	•	City/State and Zip Code	31= 130		* Trade
	pschoemann@broa	adandcassel.com ss: (to be used for future annual report notification)		Š	- 1626.
For further i	E-mail addres. information concerning this matter,	•	1000年		
Pe	eter A. Schoemann	at (407) 839-4200	STATE	\$7. 170	to do 1
	Name of Person	Area Code & Daytime Telephone Number	2:	400	
Div Rep P.O	AILING ADDRESS: vision of Corporations gistration Section D. Box 6327 llahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	,		
	is a check for the following ar 25.00 Filing Fee \$130.00 Filin Certificate of	g Fee & \$155.00 Filing Fee & \$\sqrt{\$160.00 Filing F}\$	ee, Certificat	te	

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Omega 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 a consent of the managers or managing members adopting the alternate name. The alternate name must Company," "L.L.C," "LLC.")	and attach a copy of the written include "Limited Liability
2. Maryland (Jurisdiction under the law of which foreign limited liability company is organized) 3. 45-2458651 (FEI number, if approximately	olicable)
4. June 6, 2011 (Date of Organization) 5. Perpetual (Duration: Year limited liability exist or "perpetual")	company will cease to
6. Not applicable. (Date first transacted business in Florida, if prior to registration.)	
(See sections 608.501 & 608.502 P.S. to determine penalty liability) 7. 438 N. Frederick Avenue, Suite 302	
Gaithersburg, Maryland 20877 (Street Address of Principal Office)	
8. If limited liability company is a manager-managed company, check here	TOF STA
 The name and usual business addresses of the managing members or managers are Lalit Gohil, Manager 	e as follows:
438 N. Frederick Avenue, Suite 302	
Gaithersburg, Maryland 20877	•
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offic the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in translation of the certificate under eath of the translator must be submitted.)	ial having custody of records in a foreign language, a
11. Nature of business or purposes to be conducted or promoted in Florida: Hotel	
Signature of a member or an authorized representative of a me	mber.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affin penalties of perjury that the facts stated herein are true. I am aware that any false informati document to the Department of State constitutes a third degree felony as provided for	rmation under the ion submitted in a

Typed or printed name of signee

Lalit Gohil, Manager

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:	
Omega Hospitality LLC		
If unavailable, the alternate to be use	d in the state of Florida is:	
2. The name and the Florida street ac	ddress of the registered agent and office are:	2012 JAN 30 SECRETARN
B&C Corporate Se	ervices of Central Florida, Inc.	
·	(Name)	F.94 A
	ge Avenue, Suite 1400	OF STA
Florida St	reet Address (P.O. Box NOT ACCEPTABLE)	
Orlando	_{FL} 32801	<u>.</u>
	City/State/Zip	

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.

BEC CORPORATE SERVICES OF CENTRAL FLORIDA, INC.

Vice President (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT OMEGA HOSPITALITY LLC, REGISTERED JUNE 06, 2011, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS JANUARY 30, 2012.

Paul B. Anderson Charter Division



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097