Ø 001/003 Page 1 of 1

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000004503 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : NRAI SERVICES, LLC

Account Number : 120080000104 : (302)674-4089

: (302)674-5266 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please  $\mathcal{A}_{\mathcal{O}}$ 

Email Address: sserna@crescentheights.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SOBEÇA, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

1/8 O.K. Per CcH.

Electronic Filing Menu

Corporate Filing Menu

Hell. BRYAN

JAN -8

EXAMINER

### `APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

#### SECTION I (1-3 must be completed)

- 1. Name of limited liability company as it appears on the records of the Florida Department of State: SOBECA, LLC

  2. Jurisdiction of its organization: DELAWARE
- 3. Date authorized to do business in Florida: MARCH 21, 2012

#### SECTION II (4-7 complete only the applicable changes)

- 4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? JANUARY 3, 2012
- 5. New name of the limited liability company: CH MIAMI HOTEL, LLC (must end with "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Fiorida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

- 6. If the amendment changes the period of duration, indicate new period of duration:
- 7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
- 8. If the amendment corrects any false statement, indicate the statement being corrected—and the correction: 9. The name of the managers are as follows: CM Sobers Holdings, LLC and FB Miami Beach, LLC is being corrected.

The correction reads: 6. The name of the manager is CH Miami Hotel Holdings, LLC, 2200 Blaceyne Blvd., Miami, FL 33137

 Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of a member or the authorized representative of a member

Sharon Christenbury, Authorized Representative

Typed or printed name of signes

Filing Fee: \$25.00

# Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "SOBECA, LLC", FILED A

CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "CH MIAMI HOTEL,

LLC", THE THIRD DAY OF JANUARY, A.D. 2013, AT 4:23 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

5122241 8320

130013805

You may verify this certificate onlin at coverdelaware gov/authver.shtml AUTHENTY CATION: 0119209

DATE: 01-04-13