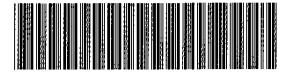
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DEPARTMENT OF STATE

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SECRETARY OF STATE

CORPDIRECT AGE 515 EAST PARK AV TALLAHASSEE, FL 222-1173	NTS, INC. (for ENUE , 32301	merly CCRS)	
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CONTACT:	RICKY SO	to	
DATE:	10/05/2012		
REF. #:	001495.1739	24	
CORP. NAME:	PALM BEA	CH HISTORIC INN LLC	
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() ANNUAL REPORT		() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME
(XX) FOREIGN QUALIF	ICATION	() LIMITED PARTNERSHIP	() LIMITED LIABILITY
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Examiner's Initials

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:

Palm Beach Historic Inn LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")						
						
CO	(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC,")					
2.	Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)					
4.	August 2, 2012 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")					
6.	Upon registration (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)					
7.	265 Sunrise Avenue-Suite 204A, Palm Beach, FL 33480					
	(Street Address of Principal Office)					
8.	If limited liability company is a manager-managed company, check here					
9.	The name and usual business addresses of the managing members or managers are as follows:					
	Alicia O. Grace, 265 Sunrise Avenue-Suite 204A, Palm Beach, FL 33480					
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in injurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a natation of the certificate under oath of the translator must be submitted.)					
11	. Nature of business or purposes to be conducted or promoted in Florida:					
	To engage in any activity permitted by the Florida Limited Liability Company Act.					
	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 under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817,155, F.S.). Thomas L. Selfert, Authorized Representative					

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.

1. The name of t	the Limited Liability Company is:
Palm Beac	ch Historic Inn LLC
If unavailable, th	he alternate to be used in the state of Florida is:
2. The name and	d the Florida street address of the registered agent and office are:
_	United Corporate Services, Inc.
	(Name)
_	9200 South Dadeland Blvd., Suite 508
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
_	Miami, _{FL} 33156
•	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.

(Signature) Michael A. Barr, President

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PALM BEACH HISTORIC INN 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 FOURTH DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PALM BEACH HISTORIC INN LLC" WAS FORMED ON THE SECOND DAY OF AUGUST, A.D. 2012.

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

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DATE: 10-04-12

AUTHENTACATION: 9895302

Jeffrey W. Bullock, Secretary of State

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