# M13000001738

(Re	questor's Name)				
(Ad	dress)				
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(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Do	ocument Number)	<del></del> .			
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

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IUN SEKVICE CUMPANT							
ACCOUNT NO. : I2000000195							
REFERENCE : 574928 4814233							
AUTHORIZATION: Spellelenan							
COST LIMIT : \$ 130.00							
ORDER DATE: March 19, 2013							
ORDER TIME : 8:50 AM							
ORDER NO. : 574928-005							
CUSTOMER NO: 4814233							
FOREIGN FILINGS							
NAME: PHG OKEECHOBEE, LLC							
XXXX QUALIFICATION (TYPE: <u>LL</u> )							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY  XX PLAIN STAMPED COPY  XX CERTIFICATE OF GOOD STANDING							
CONTACT PERSON: Susie Knight EXT# 52956							

EXAMINER:

### 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 COMPANY TO TRANSACT RESIDENCES. IN THE STATE OF ELORIDA:

	PHG Okeechobee, LLC	_	
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")		
co	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabi ompany," "L.L.C," "LLC.")		1
2.	Georgia 3. 80-0896638		
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	-	
4.	2/19/2013 5 Perpetual		
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	•	
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)	· 2813	
7.	5607 Glenridge Drive NE, Suite 430	MAR	
	Atlanta, GA 30342		r
	(Street Address of Principal Office)	. 9	ŗ
3.	If limited liability company is a manager-managed company, check here	₹ 戸	Ç
€.	The name and usual business addresses of the managing members or managers are as follows:	17	
	Peachtree Hotel Group II, LLC		
	5607 Glenridge Drive NE, Suite 430, Atlanta, GA 30342		
	• • • • • • • • • • • • • • • • • • •		
he	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recipins a foreign language, and it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, and it is organized to the certificate under oath of the translator must be submitted.)	ords in	
1	. Nature of business or purposes to be conducted or promoted in Florida: To conduct any		
	lawful business or activity under the laws of the State of Florida.		•
	/gA		
	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.)		

Jatin Desai, Manager of the Manager

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 nam	ne of the Limited Liability	Company is:	
PHG Okeech	obee, LLC		
If unavailab	ole, the alternate to be used	I in the state of Florida is:	
2. The nam	e and the Florida street add	dress of the registered agent and office are:	
	Corporation Service Comp	pany	SECR FALL
		(Name)	AR 19
	1201 Hays Street		i i i co
	Florida Stre Tallahassee	et Address (P.O. Box <u>NOT</u> ACCEPTABLE)	F STATE FLORID
		City/State/Zip	
liability comp agent and ag relating to th	pany at the place designated gree to act in this capacity. he proper and complete perf		ent as registered ll statutes l accept the
		0.00 Filing Fee for Application 5.00 Designation of Registered Agent	

Certified Copy (optional)
Certificate of Status (optional)

\$ 30.00

\$ 5.00

#### STATE OF GEORGIA

Secretary of State Corporations Division 313 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 13236288

DATE INC/AUTH/FILED : 2/19/2013 11:19:20 AM

JURISDICTION : Georgia

PRINT DATE : 3/18/2013 3:50:58 PM

Morris Manning & Martin 3343 Peachtree Road NE Atlanta, GA 30326

#### CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

PHG Okeechobee, LLC A Domestic Limited Liability Company

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Brian P. Kemp Secretary of State

Tracking #: snELp91u