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DEPARTMENT OF STATE

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ION SERVICE COMPANY				
ACCOUNT NO.	:	12000000195		
REFERENCE	:	$\mathcal{L}(\mathcal{L}) \subset \mathcal{L}(\mathcal{L})$		
AUTHORIZATION	:	Spellenan		
COST LIMIT	:	\$ 125.00		
ORDER DATE : April 10, 2013				
ORDER TIME : 9:34 AM				
ORDER NO. : 606629-010				
CUSTOMER NO: 4321791				
FOREIGN FI	LI	NGS		
NAME: RELATED CITYPLACE HOTEL LLC				
XXXX QUALIFICATION (TYPE: LL)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				

EXAMINER:

CONTACT PERSON: Susie Knight -- EXT# 52956

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 BUSINESS IN THE STATE OF FLORIDA:

1 Related CityPlace Hotel 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 Florid consent of the managers or managing members adopting the alternate name. The alternate name mu Company," "L.L.C." "LLC.")	
2. Delaware 3. PENDING	
(Jurisdiction under the law of which foreign limited hability (FEI number, if a company is organized)	pplicable)
April 3, 2013 5. December 31, 2112	•
(Date of Organization) (Date of Organization) (Duration: Year limited liabilities or "perpetual")	ty company will cease to
6	
(Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)	
7. 60 Columbus Circle	
New York, New York 10023	
(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:
The Related Companies, L.P., 60 Columbus Circle, New York, New York 10023	
10. Attacked is an original certificate of existence, no more than 90 days old, duly authenticated by the the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate translation of the certificate under oath of the translation must be submitted.)	- •
11. Nature of business or purposes to be conducted or promoted in Florida: real e	state investment
MAION	•
Signature of a member or an authorized representative of a r	nember.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an penalties of perjury that the facts stated herein are true. I am aware that any false inform document to the Department of State constitutes a third degree felony as provided	nation submitted in a
Michael H. Orbison, Authorized Person	,
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	of the Limited Liabilit	y Company is:			
RELATED CITYPLACE HOTEL, LLC					
If unavailable,	, the alternate to be us	ed in the state of Florida is:			
2. The name a	and the Florida street a	address of the registered agent and office are:			
	Corporation Service	Company	湖(2813	
		(Name)	- Property of the second of th	3 / P R	
	1201 Hays Street			70	44.194.4 ***********************************
	Florida	Street Address (P.O. Box NOT ACCEPTABLE)		₹ <u>.</u>	f
	Tallahassee	FL 32301	رمی است استان کیا استان کیا	yp ယ	S. INV.
		City/State/Zip		Ω.	

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.

Corpor By:	ation Service	Company	Janet Budhu, Asst. 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)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "RELATED CITYPLACE HOTEL 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 TENTH DAY OF APRIL, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RELATED CITYPLACE HOTEL LLC" WAS FORMED ON THE THIRD DAY OF APRIL, A.D. 2013.

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

5313796 8300

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AUTHENTY CATION: 0349297

DATE: 04-10-13

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