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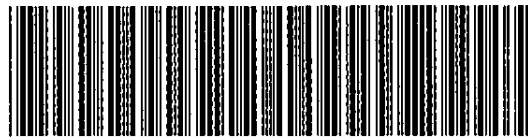
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**DATE: 5/24/13**

**NAME: OLYMPIA HOTEL MANAGEMENT, LLC**

**TYPE OF FILING: APPLICATION**

**COST: 125.00**

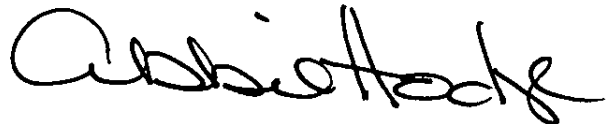
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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



**OLYMPIA HOTEL MANAGEMENT, LLC**

**CONSENT OF MEMBER**

The undersigned, being the Sole Member of Olympia Hotel Management, LLC (the "Company"), hereby takes the following action without holding a meeting:

VOTED: To authorize the Company to transact business in the State of Florida under the assumed name "OHM-Alfond Inn, LLC," and hereby accepts said assumed name for such purpose.

This document shall be kept with the minutes of the Company.

THE OLYMPIA COMPANIES, LLC, a Delaware limited liability company, its Sole Member

By: OEI Management Corp., its Manager

By:   
Kevin P. Mahaney, President

Dated: May 24, 2013

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

SUBJECT: Olympia Hotel Management, LLC  
Name of Limited Liability Company

Sfilipos@theolympiacompanies.com  
E-mail address: (to be used for future annual report notification)

Susan Filipos in (207) 874-9990  
Name of Person Area Code & Daytime Telephone Number

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy**

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Olympia Hotel Management LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

OHM - Alford Inn, LLC

(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 3. 20-3453593  
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)  
company is organized)

4. 10/18/2005 5. Perpetual  
(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")

6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)  
7. 7 custom House Street  
PO Box 508 Portland, Maine 04112  
(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:

Kevin P. Mahaney 7 custom House Street  
P.O. Box 508  
Portland, Me 04112

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in  
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a  
translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Hotel Management

Kevin P. Mahaney  
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.)

Kevin P Mahaney  
Typed or printed name of signee

2013 MAY 24 AM 10 36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: Olympia Hotel Management, LLC

If unavailable, the alternate to be used in the state of Florida is:

OHM - Alford Inn, LLC

2. The name and the Florida street address of the registered agent and office are:

National Corporate Research, Ltd.

(Name)

155 Office Plaza Drive

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee FL 32301

City/State/Zip

2019 MAY 24 AM 10 36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*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.*

National Corporate Research, Ltd, Inc.

Julie Watson, Asst Sec

(Signature)

Julie Watson, Asst Sec.

|           |                                  |
|-----------|----------------------------------|
| \$ 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 "OLYMPIA HOTEL MANAGEMENT, 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 TWENTY-SECOND DAY OF MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "OLYMPIA HOTEL MANAGEMENT, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF OCTOBER, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4046727 8300

130634925



You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 0452706

DATE: 05-22-13