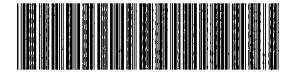
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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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January 9, 2014

MARLO DELANGE 1201 PACIFIC AVE STE 1900 TACOMA, WA 98402

SUBJECT: GEMSTONE HOTELS & RESORTS LLC

Ref. Number: W14000001728

We have received your document for GEMSTONE HOTELS & RESORTS LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 414A00000612

COVER LETTER

TO:

	egistration Section ivision of Corporations			
SUBJECT	Gemstone Hotels & R	esorts, LLC		
	· · · · · · · · · · · · · · · · · · ·	Name of Limited Li	ability Company	· · · · · · · · · · · · · · · · · · ·
				ransact Business in Florida," Certificate of ity company to transact business in Florida.
Please retu	rn all correspondence concernin	g this matter to the follow	ring:	
	Marlo DeLange			
		Name of	Person	
	Vandeberg Johnson	ı & Gandara LLP		
		Firm/Cor	npany	
	1201 Pacific Ave., S	Ste. 1900		
		Addr	ess	
	Tacoma, WA 9840	<u>)</u>		
		City/State and	Zip Code	
	mdelange@vjglaw.o			
	E-mail a	ddress: (to be used for fu	ure annual report no	otification)
For further	information concerning this ma	ter, please call:		
Marlo DeLange		at (253 ₎ 383-	3791
	Name of Person	· · · · · · · · · · · · · · · · · · ·	Area Code Day	time Telephone Number
Di Re P.	AILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314	STREET AD Division of Co Registration S Clifton Buildi 2661 Executiv Tallahassee, F	orporations ection ng re Center Circle	
		.00 Filing Fee & 🔲 \$	155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Gemstone Hotels & Resorts, 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 Florida an onsent of the managers or managing members adopting the alternate name. The alternate name must in Company," "L.L.C," "LLC.")	d attach a cop iclude "Limite	y of the v	vritten ty
_{3.} 841470690			
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if appliance of appliance of the law of which foreign limited liability (FEI number, if appliance of the law of which foreign limited liability (FEI number, if appliance of the law of which foreign limited liability (FEI number, if appliance of the law of which foreign limited liability (FEI number, if appliance of the law of which foreign limited liability (FEI number, if appliance of the law of which foreign limited liability (FEI number) (FEI num	cable)		
_{l.} January 15, 2014			_
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			,
1912 Sidewinder Dr., Ste. 104	·		
Park City, UT 84060	5. 65. 65.	a. .;;	_
(Street Address of Principal Office)		~;† 4≈	
5. 1912 Sidewinder Dr., Ste. 104	178-	્ર	-
Park City, UT 84060	1 . 1 	1 T.7	
(Mailing Address)	,		•
7. The name, title or capacity and address of the person(s) who has/have authority to	manage is/a	are:	
Jeff McIntyre, Managing Member, 1912 Sidewinder Dr., Ste. 104, Park City, U			
			•
Thomas Prins, Managing Member, 1281 E. Main St., Ste. 200, Stamford, CT	06902		
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the officent the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is anslation of the certificate under oath of the translator must be submitted.)			
Signature of an authorized person		•	
(In accordance with section 605.0203, H.S., the execution of this document constitutes an affirm penalties of perjury that the facts stated herein are true. I am aware that any false informatic document to the Department of State constitutes a third degree felony as provided for	n submitted ir	n a	
Typed of printed name of signee			

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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	f the Limited Liability Co	ompany is:			
Gemstone H	otels & Resorts, LLC				
If unavailable,	the alternate to be used in	n the state of Florida is:			
2. The name a	nd the Florida street addr	ess of the registered agent and office a	re:		
	Registered Agent Solutions, Inc.				
		(Name)		11. 20.00	
	155 Office Plaza Dr.	Suite A , 32301	3-	1,1	
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)	, ··.	· (2)	**
			 .	77	
	Tallahassee	_{FL} 32301	7.	. •	
		City/State/Zip	من ا	<u>12</u>	•

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 605, Florida Statutes.

Jalyn Wingt Asst. Secretary
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

STATE OF MISSOURI



Jason Kander Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

GEMSTONE HOTELS & RESORTS, LLC LC0021014

was created under the laws of this State on the 20th day of July, 1998, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 28th day of January, 2014



Certification Number: 15866412-1 Reference:

Verify this certificate online at https://www.sos.mo.gov/businessentity/soskb/verify.asp