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EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE: 089754 7527656

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE : April 9, 2014

ORDER TIME : 3:56 PM

ORDER NO. : 089754-020

CUSTOMER NO: 7527656

#### FOREIGN FILINGS

NAME: HHLP KEY WEST ONE ASSOCIATES,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY \_\_\_\_ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

#### **COVER LETTER**

TO: Registration Section Division of Corporations

HHLP Key West One Associates, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Enclosed is a check for the following amount:

☐ \$130.00 Filing Fee &

Certificate of Status

☐ \$125.00 Filing Fee

Please return all correspondence concerning this ma	atter to the following:	
Kasey Stelweck	c/o Thea Par	ent, Esq.
The state of the s	Name of Person	
Hersha Hospita	lity	
	Firm/Company	
510 Walnut Stre	eet, 9th Floor	
	Address	NORMAN MANUS (NO 1778 - 1774 - 1774 - 1774 - 1774 - 1774 - 1774 - 1774 - 1774 - 1774 - 1774 - 1774 - 1774 - 17
Philadelphia, PA	4 19106	
	City/State and Zip Code	ad the section of the
legal@hersha.c		
E-mail address:	(to be used for future annual repo	rt notification)
For further information concerning this matter, please	se call:	
Kasey Stelweck	<sub>at</sub> 215	238-1046X2440
Name of Contact Person	Area Code	Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327	STREET ADDRESS: Division of Corporations Registration Section Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

□ \$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:

(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. The alternate name must includability Company," "L.L.C." or "LLC.")	ode "Limit	ied
DE a Applied for		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. Upon filing		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	Manager Communication of the C	
5. 44 Hersha Drive		
Harrisburg, PA 17102		
(Street Address of Principal Office)		
6. 501 Walnut Street, 9th Floor		
Philadelphia, PA 19106		
(Mailing Address)	, K3	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/at	e:	e
Key West One Manager, LLC; Its manager		,
44 Hersha Drive		ر د ر
Harrisburg, PA 17102	==:	
Transburg, 174 17 (02		
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by having custody of records in the jurisdiction under the law of which it is organized. (A photocopy acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the must be submitted)  Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of purjuty that the facts s 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.	is not ne transla	ator
Ashish R. Parikh		

Typed or 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.

f unavailabl	e, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:			
	Corporation Service Company	<b>57</b> 4	
	(Name)		
	1201 Hays Street	· · · · · · · · · · · · · · · · · · ·	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	, 10 mm	
	Tallahassee 32301	<u> </u>	
	City/State/Zip		

\$ 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 "HHLP KEY WEST ONE ASSOCIATES, 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 ELEVENTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HHLP KEY WEST ONE ASSOCIATES, LLC" WAS FORMED ON THE NINTH DAY OF APRIL, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE

NOT BEEN ASSESSED TO DATE.

5514343 8300

140458786

Jeffrey W Bullock, Secretary of State
AUTHENTY CATION: 1285852

DATE: 04-11-14

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