M14000003770

(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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JUN-2 PM 3:2%

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ACCOUNT NO. 120000000195

	ACCOUNT NO.	. 120000000	
	REFERENCE	: 155792	4370110
	AUTHORIZATION	melsele ma	9
	COST LIMIT (. \$ 155	
ORDER DATE :	May 28, 2014		
ORDER TIME :	1:14 PM		
ORDER NO. :	155792-035		
CUSTOMER NO:	4370110		
	FOREIGN FI	<u>LINGS</u>	
NAME:	ASHFORD POOL A	. GP LLC	
XXXX QUALIFI	CATION (TYPE: <u>LL</u>)	

XXXX QUALIFICATION (TYPE: <u>LL</u>)	
PLEASE RETURN THE FOLLOWING AS P	ROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STAN	DING
CONTACT PERSON: Emily Gray E	XT# 62925 EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Ashford Pool A GP 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.
Please return all correspondence concerning this matter to the following:
Ruth Shumway
Name of Person
Ashford
Firm/Company
14185 Dallas Parkway, Suite 1100
Address
Dallas, TX 75254
City/State and Zip Code
rshumway@ashfordinc.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ruth Shumway 972 778-9203
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton Building
Tallahassee, FL 32314 Carton Banding 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigsig \mathbb{1}25.00 \text{ Filing Fee} \Bigsig \mathbb{1}30.00 \text{ Filing Fee & Bound Filing Fee & Certificate of Status}\$ \$\Bigsig \mathbb{1}25.00 \text{ Filing Fee & Bound Filing Fee & Certified Copy} \text{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:

FOREIGN LIMITED LIABILITY COMPANY TO TR	ANSACT BUSINESS IN THE STATE OF FLORIDA:
I. Ashford Pool A GP 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 pulliability Company," "L.L.C," or "LLC.") Delaware	rpose of transacting business in Florida. The alternate name must include "Limited 3. 46-5440110
(Jurisdiction under the law of which foreign limited liability	ty (FEI number, if applicable)
company is organized)	•
4. 04/14/2014	To 20
(Date first transacted b (See sections 605.0904 &	usiness in Florida, if prior to registration.) 605:0905, F.S. to determine penalty liability)
_{5.} 14185 Dallas Parkway, Suit	e 1100.
Dallas, TX 75254	et Address of Principal Office)
(Stre	et Address of Principal Office)
6. same as item 5	
	(Mailing Address)
a	
7. The name, title or capacity and address of	the person(s) who has/have authority to manage is/are:
David A. Brooks, Manager	
14185 Dallas Parkway, Suite	1100
Dallas, TX 75254	
having custody of records in the jurisdiction used acceptable. If the certificate is in a foreign land must be submitted) Signat (In accordance with section 605.0203, F.S., the execution of this documents)	nce, no more than 90 days old, duly authenticated by the official under the law of which it is organized. (A photocopy is not iguage, a translation of the certificate under oath of the translator cure of an authorized person cument constitutes an affirmation under the penalties of perjury that the facts stated herein are true. In Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Typed o	r 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.

	ne, the ancinate to be used in the	state of Florida is:	
2. The nam	ee and the Florida street address of	of the registered agent and office ar	e:
	Corporation Service Company	,	
		(Name)	
	1201 Hays Street		
	Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)	
	Tallahassee	32301 FL	
		City/State/Zip	
liability com registered a _l statutes rela	ppany at the place designated in the gent and agree to act in this capa Ting to the proper and complete p	to accept service of process for the a his certificate, I hereby accept the ap wity. I further agree to comply with performance of my duties, and I am f tered agent as provided for in Chap	opointment as the provisions of all amiliar with and
	Corporation Service Company	grome 1. Survey	

\$ 25.00 \$ 30.00

5.00

Designation of Registered Agent

Certified Copy (optional)

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 "ASHFORD POOL A GP 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-NINTH DAY OF MAY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASHFORD POOL A GP LLC" WAS FORMED ON THE FOURTEENTH DAY OF APRIL, A.D. 2014.

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

5516494 8300

140741058

Jeffrey W Bullock, Secretary of State

AUTHENTYCATION: 1407098

DATE: 05-29-14

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