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	(City/State/Zip/Phone #)	
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Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	
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T. HAMPTON



ACCOUNT NO. : 12000000195 REFERENCE : 195087 4345850 AUTHORIZATION COST LIMIT ORDER DATE: June 26, 2014 ORDER TIME : 5:27 PM ORDER NO. : 195087-005 CUSTOMER NO: 4345850 FOREIGN FILINGS NAME: CS BRICKELL 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: Emily Gray -- EXT# 62925

COVER LETTER

TO:	Registration Section
	Division of Corporations

CS BRICKELL 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:

Rachana Oza
Name of Person
Choice Hotels International
Firm/Company
1 Choice Hotels Circle, #400
Address
Rockville, MD 20850
City/State and Zip Code
ana_oza@choicehotels.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rachana Oza

_301

592-6113

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.00 Filing Fee &

Certificate of Status

□ \$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:

I. CS BRICKELL LLC		
(Name of Foreign Limited Liability Company; must include "	Limited Liability Company,,, "L.L.C.,,, c	or "LLC.,,)
(If name unavailable, enter alternate name adopted for the purpose of transa Liability Company,, "L.L.C., or "LLC.,)	cting business in Florida. The alternate n	ame must include "Limited
•	47-1193249	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applie	iable) or
4.	•	
(Date first transacted business in Flor (See sections 605.0904 & 605.0905, F.S.	ida, if prior to registration.) . to determine penalty liability)	ASS - 2
5. 1 Choice Hotels Circle, #400		MO Z M
Rockville, MD 20850		FLOO ST
(Street Address of F	rincipal Office)	<u> </u>
6. 1 Choice Hotels Circle, #400		
Rockville, MD 20850		
(Mailing A	ddress)	
7. The name, title or capacity and address of the person(•	•
Steve Joyce, CEO of sole member	ADDRESS: 1 Choice Hotels Circ Rockville, MD 20850	cle, #400
David White, CFO of sole member	ADDRESS: 1 Choice Hotels Circ Rockville, MD 20850	le, #400
Simone Wu, Secretary of sole memb	ADDRESS: 1 Choice Hotels Rockville, MD 20850	Circle, #400
8. Attached is an original certificate of existence, no more having custody of records in the jurisdiction under the law acceptable. If the certificate is in a foreign language, a tramust be submitted) Signature of an au (In accordance with section 605.0203, F.S., the execution of this document constitute am aware that any false information submitted in a document to the Department of St	w of which it is organized. (A punslation of the certificate under under the certificate under the penalties of perjury as an affirmation under the penalties of perjury	photocopy is not r oath of the translator that the facts stated herein are true
DAVID WHITE	CFO	
Typed or printed na	me 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.

The name of the Limited Liability Company is: CS BRICKELL LLC				
If unavailable,	the alternate to be used i	in the state of Florida is:		
2. The name a	nd the Florida street add	ress of the registered agent and office are:		
	Corporation Service Cor	mpany		
		(Name)	-	
	1201 Hays Street			
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		-	
	Tallahassee	32301 FI.		
		City/State/Zip	-	

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.

S 100.00 Filing Fee for Application

S 25.00 Designation of Registered Agent

5 25.00 Designation of Registered Ager
\$ 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 "CS BRICKELL 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 FIRST DAY OF JULY, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CS BRICKELL LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JUNE, A.D. 2014.

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

5554722 8300

140909142

AUTHENTACATION: 1502732

DATE: 07-01-14

You may varify this certificate online at corp. delaware. gov/authvar.shtml