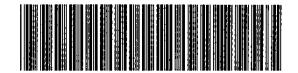
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(Re	equestor's Name)			
	dress)			
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(City/State/Zip/Phone #)				
PICK-UP	MAIT WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			





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08/08/14--01017--017 **125.00



AUG 11 2014 D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

PROSPECT HOTEL ADVISORS, L.L.C.

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:

Enclosed is a check for the following amount:

■ \$125.00 Filing Fee

ANNE MARAJ				
	Name of Person		_	
WHM LLC				
	Firm/Company		_	
501 E. CAMINO	REAL	,		
	Address		_	
BOCA RATON,	FL 33432			
	City/State and Zip Code		_	
amaraj@luxuryr		1	2814	
E-mail address: For further information concerning this matter, pleas	(to be used for future annual report notification) se call:		AUG -8	
ANNE MARAJ	_{at (} 561 447-531	8 29	8 PH	
Name of Contact Person	Area Code Daytime Telep	phone Number	<u>ت</u>	grammer G
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		-	₩3 <u>Q</u> 6.99° ¹ 1

Tallahassee, FL 32301

□ \$155.00 Filing Fee &

Certified Copy

□ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

□ \$130.00 Filing Fee &

Certificate of Status

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		SINESS IN THI	E STATE OF FLC	ORIDA:		
1. PROSPECT HOTEL ADVISOR (Name of Foreign Limited Liability Control of Foreign Liability Contr	ORS, L.L.C. Company; must include "	Limited Liability	Company," "L.L.C.	," or "LLC.")		
(If name unavailable, enter alternate name adopted Liability Company," "L.L.C," or "LLC.")	for the purpose of transa	acting business in	Florida. The alternat	te name must i	nclude "l	 Limited
_{2.} DELAWARE	3.		 20-8214355			
(Jurisdiction under the law of which foreign limi company is organized)	ted liability		(FEI number, if ap		-	
4. UPON FILING						
	nsacted business in Flor 5.0904 & 605.0905, F.S	ida, if prior to reg to determine per	gistration.) nalty liability)			
5. 501 E. CAMINO REAL						
BOCA RATON, FL 334	32					
	(Street Address of I	Principal Office)		,r ? **b.		· · ·
_{6.} 501 E. CAMINO REAL					2814	#PRETTY HORE
BOCA RATON, FL 334	32				AUG -	
	(Mailing A	(ddress)		86 T	00	
7. The name, title or capacity and add	ress of the person	(s) who has/h	ave authority to	manage is	Ære:	
PROSPECT HOTEL EQI					= .5	
MEMBER-MANGED			İ		•	
501 E. CAMINO REAL, E	OCA RATO	N. FL 33	3432			
8. Attached is an original certificate of having custody of records in the jurisd acceptable. If the certificate is in a foremust be submitted)	existence, no mor	e than 90 day w of which it	s old, duly auth is organized. (A photocop	y is no	ot
	maryo. A	nouhus				
(in accordance with section 605.0203, F.S., the execution am aware that any false information submitted in a document of the section of the s		es an affirmation u	nder the penalties of pe			
MaryJo Fi	nocchiaro					

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.

	of the Limited Liability Comp PECT HOTEL AD			
-If-unavailable	, the alternate to be used in the	e state of Florida is:		2014 AUG
2. The name	and the Florida street address	of the registered agent and office are:	ASSEE	8-
	CORPORATIO	N SERVICE COMPANY	, <u> </u>	PH 12:
		(Name)		÷
	230 SOUTH O	CEAN BOULEVARD	»- <u> </u>	
	Florida Street Ad	Idress (P.O. Box NOT ACCEPTABLE)		
	PALM BEACH	FL 33480	-	
	230 SOUTH OCEAN BOULEVARD Florida Street Address (P.O. Box NOT ACCEPTABLE) PALM BEACH 33480			

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.

(Signature)

\$ 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

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PROSPECT HOTEL ADVISORS L.L.C." 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-FOURTH DAY OF MAY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PROSPECT HOTEL ADVISORS L.L.C." WAS FORMED ON THE FOURTEENTH DAY OF DECEMBER, A.D. 1998.

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

2814 AUG -8 PH 12: 14

2979076 8300

120629827

AUTHENT CATION: 9596453

DATE: 05-24-12

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