| (Re | equestor's Name) | | | |
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W/E LAKE MARY, LLC

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| | Registration Section Division of Corporations |
|------------|--|
| SUBJEC | T: W/E Lake Mary, LLC |
| | Name of Limited Liability Company |
| | osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of e, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida |
| Please re | turn all correspondence concerning this matter to the following: |
| | Sarah Dettenwanger |
| | Name of Person |
| | Capitol Services - Corporate Filings Team |
| | Firm/Company |
| | 800 Brazos Ste 400 |
| | Address |
| | Austin TX 78701 |
| | City/State and Zip Code |
| | E-mail address: (to be used for future annual report notification) |
| For furth | er information concerning this matter, please call: |
| TOI JUILII | er mioritation concerning dus matter, please can. |
| | Sarah Dettenwanger at (800) 345-4647 Name of Contact Person Area Code Daytime Telephone Number |
| | MAILING ADDRESS: STREET ADDRESS: |
| | Division of Corporations Division of Corporations |
| | Registration Section Registration Section P.O. Box 6327 Clifton Building |
| | P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle |
| | Tallahassee, FL 32301 |
| E. J. | |
| Enclose | ed is a check for the following amount: \$125.00 Filing Fee \$ \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate |
| L | \$125.00 Filing Fee \$\ \tag{\$130.00 Filing Fee & \tag{\$155.00 Filing Fee & \tag{\$160.00 Filing Fee, Certificate }}\$ Certificate of Status Certified Copy of Status & Certified Copy |
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| | ORIGINAL SERVICE SERVI |

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 TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. W/E Lake Mary, 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. The alternate name must include "Limit Liability Company," "L.L.C," or "LLC.") | :d |
| _{2.} Delaware _{3.} 47-2703227 | |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) | |
| 4. Upon qualification | |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) | |
| _{5.} 40 Danbury Road | |
| Wilton, Connecticut 06897 | |
| (Street Address of Principal Office) 6. 40 Danbury Road | |
| Wilton, Connectict 06897 | |
| (Mailing Address) コンピュ | 22 25 |
| 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/ar | |
| W/E Hotel Venture, LLC, Sole Member | <u> </u> |
| 40 Danbury Road | |
| Wilton, Connecticut 06897 | ي. د |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offici having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the transla must be submitted) Signature of an authorized person | |

Marc Porosoff, Authorized Person

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 Con Ke Mary, LLC | npany is: | | |
|------------------|--|---|--|-------|
| If unavailable, | , the alternate to be used in t | he state of Florida is: | | |
| 2. The name a | and the Florida street addres | s of the registered agent and office are: | | |
| | Corporation Se | ervice Company | 2015 . SEC TALL | ٦ |
| | | (Name) | A THE TANK T | - |
| 1201 Hays Street | | SSE YES | 77 | |
| | Florida Street A | Address (P.O. Box NOT ACCEPTABLE) | EFL S | . i |
| | Tallahasee | 32301 | 9: 36 9: 36 STATE CORNELL | تجميه |
| | | City/State/Zip | خن ا | |

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.

Carine L. Dunlap

Asst. Vice President
(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

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "W/E LAKE MARY, 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 NINTH DAY OF JANUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "W/E LAKE MARY, LLC" WAS FORMED ON THE SECOND DAY OF JANUARY, A.D. 2015.

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

5667884 8300

150031372

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

AUTHENTY CATION: 2024939

DATE: 01-09-15