Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Foreign Limited Liability Company Hotel 14501 Hotel Opco GP, L.L.C.

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Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

TO:		tion Section of Corporation	•				
Subje	ест:				Hotel Opco GP, L.	.L.C.	
The en	closed "Ap toe, and ch	plication by Fore	eign Limited Liability	Company	for Authorization to	Transset Business ility company to tr	in Florida," Certificate of ansact business in Florida
Please	return all c	arrespondence c	oncerning this matter	to the foll	owing:		
		Jiang Lu					
	·			Name	of Person		
		Rinaldi, Finkelst	ein & Franklin, LLC				
				Firm	Company		
		591 W Putnam A	\ve				
				۸۰	ldress		
		Greenwich C					
				City/State	and Zip Code		
	-	jlu@Starwood.co		be used for	future annual report no	Milication)	
For fur	ther inform	nation concerning	this matter, please of			•	
			,				
		Name o	f Contact Person		Area Code	Daytime Telephone	Number
	MAILI	NG ADDRESS:		TREET A	ADDRESS:		
	Division	of Corporations	D	ivision of	Corporations		
	Registra P.O. Bo	tion Section		legistratio Hifton Bui			
		see, FL 32314	2	661 Execu	utive Center Circle 2, FL 32301		
Enclo	sed is a d	heck for the f	ollowing amount:				
		00 Filing Fee	☐ \$130.00 Filing Fo Certificate of Sta		3155.00 Filing Fee Certified Copy		filing Fee, Certificate & 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:

[Hotel 14501 Hotel Open GP, L.L.C.		_	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.	C.," or "L.L.C.	")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florids. The alte Liability Company," "L.L.C," or "LLC.")	mate usino mu	il include	"Limited
2. Delaware 3.			
(Jurisdiction under the law of which foreign limited liability (FEI number, is company is organized)	opplicable)		
4. Upon Filing	*	~3	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty limbility)	58	뿘	— —
5. 591 W. Putnam Ave, Greenwich CT 06830	Hairii Accord	YH	# E
	7,650 20-<	Ė	Carrie
(Street Address of Principal Office)	ر الله الله الله الله الله الله الله الل	\triangleright	- [a la
6. 591 W. Pulnam Ave, Greenwich CT 06830	5 3	۵	
		52	
(Mailing Address)			_
7. The name, title or capacity and address of the person(s) who has/have authority SHG SCG II Open Holdings, L.P., Member, 591 W. Putnam Ave, Greenwich CT 06830	y to manage	is/are:	-
8. Attached is an original certificate of existence, no more than 90 days old, duly a having custody of records in the jurisdiction under the law of which it is organized acceptable. If the certificate is in a foreign language, a translation of the certificate must be submitted)	. (A photoc	opy is r	not
M			
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes on affirmation under the penalties of an aware that any false information submitted in a document to the Department of State constitutes a third degree felony of	f perjury that the provided for its	Facts states 6.8 (7.155,	i herein ara true F.S.)
Nick Antonopoulos			
Typed or printed name of signee	_		

1. The name of the Limited Liability Company is:

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.

If unavailab	e, the alternate to be used in the state of Florida is:	
2. The nam	e and the Florida street address of the registered agent and office are:	
	C T Corporation System	
	(Name)	
	1200 South Pine Island Road	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation FL 33324	
llability con	City/Stote/Zip named as registered agent and to accept service of process for the above stated limi pany at the place designated in this certificate, I hereby accept the appointment as	
llability con registered a statutes rela	named as registered agent and to accept service of process for the above stated limit pany at the place designated in this certificate, I hereby accept the appointment as gent and agree to act in this capacity. I further agree to comply with the provisions of the proper and complete performance of my duties, and I am familiar with an obligations of my position as registered agent as provided for in Chapter 605, Florida CT Corporation System	of all d
llability con registered a statutes rela accept the o	named as registered agent and to accept service of process for the above stated limit pany at the place designated in this certificate, I hereby accept the appointment as gent and agree to act in this capacity. I further agree to comply with the provisions of the proper and complete performance of my duties, and I am familiar with an obligations of my position as registered agent as provided for in Chapter 605, Florida CT Corporation System	of all d

Delaware

DAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "HOTEL 14501 HOTEL OPCO GP, 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 FOURTH DAY OF MAY, A.D. 2015.

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

5736755 8300

150606949

You may vorify this cortificate online at corp.dolaware.gov/authwor.shtml

jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 2344276

DATE: 05-04-15