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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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SEURETARY OF STATE
AN ASSEE, FLORIO

JUL 2 2 2015

C. Miller

#### **COVER LETTER**

TO:		ition Section  of Corporation	s				
SÚBJE		el Appraisals, LL					
Name of Limited Liability Company							
The end Existen	closed "Ar	oplication by Fore	eign Limited Liability Comp I to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida," company to transact busing	Certificate of ess in Florida
Please 1	return all c	orrespondence co	oncerning this matter to the	following:			
		Ken Lin					
			N	ame of Person			
		Hotel Appraisal	s, LLC				
			Fi	rm/Company			
		369 Willis Aver	nue				
		<del> </del>		Address			
		Mineola, NY 11	501				
			City/S	tate and Zip Code			
	ı	din@hvs.com					
	_		E-mail address: (to be used	d for future annual	report not	ification)	
For furt	ther inforn	nation concerning	this matter, please call:				
	Ken Lin	ı		516 at (	248-882	28 ext 221	
		Name of	Contact Person	Area Code	Day	time Telephone Number	
	Division Registra P.O. Box	of Corporations tion Section x 6327 see, FL 32314			Division Registrati Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle see, FL 32301	
Enclose		ck for the followi 00 Filing Fee	ng amount:  ☐ \$130.00 Filing Fee &  Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Ce of Status & Certified Cop	

## 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 Appraisals, LLC				
- (Name of Fore	ign Limited Liability Cor	mpany; must include "Limited	Liability Company," "L.L.C.,"	or "LLC.")
(If name unavailable, enter al	ternate name adopted for	the purpose of transacting bu	siness in Florida. The alternate n	ame must include "Limited
Liability Company," "L.L.C,"	" or "LLC.")	,		
2. Delaware		3. <u>52-22546</u>		
(Jurisdiction under the law company is organized)	of which foreign limited l	liability	(FEI number, if applicab	le)
4				<u></u>
	(Date first transactions 605.0)	cted business in Florida, if pri 1904 & 605.0905, F.S. to deter	ior to registration.) rmine penalty liability)	
5. 369 Willis Avenue				_
Mineola, NY 11501				TALL TS
<u></u>	(Street A	Address of Principal Office)		
6. 369 Willis Avenue				_ FF 2
Mineola, NY 11501				SSET E
		(Mailing Address)		
7. Name and street address	ss of Florida registered	agent: (P.O. Box NOT ac	cceptable)	MID: 29 Kef, STATE
Name:	Gregory Palmer			9 FE A
Office Address:	1220 Twelve Oaks Ro	oad		
	Saint Cloud		, Florida <u>34771</u>	
		(City)	(Zip code)	<del>_</del>
this application, I hereby	gistered agent and to a accept the appointmen statutes relative to the	nt as registered agent and o proper and complete perfo	or the above stated corporation agree to act in this capacity.  ormance of my duties, and I described the corporation in the capacity.	I further agree to comply
8. The name, title or capa Ken Lin, Controller	acity and address of the	e person(s) who has/have at	uthority to manage is/are:	
369 Willis Avenue		-		
Mineola, NY 11501				
jurisdiction under the law of the translator must be si	of which it is organized ubmitted)	d. (If the certificate is in a f		of the certificate under oath
This document is executed submitted in a document to	I in accordance with sec the Department of Sta	ction 605.0203 (1) (b), Floi ite constitutes a third degre	rida Statutes. I am aware that a e felony as provided for in s.8	any false information 17.155, F.S.

Typed or printed name of signee

Ken Lin, Controller

# Delaware

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAMARE, DO HEREHY CERTIFY "HOTEL APPRAISALS, 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 SIXTEENTH DAY OF JULY, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HOTEL APPRAISALS, LLC" MAS FORMED ON THE TWENTY-EIGHTH DAY OF APRIL, A.D. 2000.

3219804 8300

151059558

DATE: 07-16-15

CATION: 2563490

The tay verify this certificate online at top, delawise gov/authver, shtml