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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
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2015 JUL 24 A 9: 27
SECRETARY OF STATE.

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HULL S.7 2015 D. BRUCE CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

REFERENCE : 720454 5012771

AUTHORIZATION : Smelled and

COST LIMIT : (\$' \lambda 25.00

ORDER DATE : July 23, 2015

ORDER TIME : 9:09 AM

ORDER NO. : 720454-005

CUSTOMER NO: 5012771

#### FOREIGN FILINGS

NAME: FAENA HOTELS AND RESIDENCES

LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

### Faena Hotels and Residences 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:	
Lisa Mattson	
Name of Person	
Access Industries, Inc.	
Firm/Company	
730 Fifth Avenue, 20th Floor	
Address	
New York, New York 10019 본유 및	
City/State and Zip Code	777
City/State and Zip Code  Imattson@accind.com  E-mail address: (to be used for future annual report notification)	
E-mail address: (to be used for future annual report notification)	7
For further information concerning this matter, please call:	
Lisa Mattson (212 ) 247-6400 (247)	
Name of Contact Person Area Code Daytime Telephone Number	
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status  Certificate of Status  Certified Copy  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:

(Name of Foreign Limited Liability Company; must include "Limited Liability Co	mpany," "L.L.C.," or "LLC.")
If name unavailable, enter alternate name adopted for the purpose of transacting business in Flo.iability Company, "L.L.C," or "LLC.")	rida. The alternate name must include "Limited
Delaware	
(Jurisdiction under the law of which foreign limited liability (F company is organized)	El number, if applicable)
upon registration	
(Date first transacted business in Florida, if prior to registr (See sections 605.0904 & 605.0905, F.S. to determine penalty	ation.) y liability)
3201 Collins Avenue	
Miami Beach, Florida 33140	2015 SEC TALL
(Street Address of Principal Office)  3201 Collins Avenue	ARETAP ANASS
Miami Beach, Florida 33140	E C
(Mailing Address)	STA 9
7. The name, title or capacity and address of the person(s) who has/have	
Access Industries Management, LLC - manage	r
730 Fifth Avenue, 20th Floor	
New York, New York 10019	
TOIR, 14CW TOIR 10019	
d. Attached is an original certificate of existence, no more than 90 days of aving custody of records in the jurisdiction under the law of which it is a compatible. If the certificate is in a foreign language, a translation of the const be submitted)	organized. (A photocopy is not
DocuSigned by:	

Alejandro Moreno

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.

	e of the Limited Liability Co s and Residences LLC	ompany is:	
If unavailab	le, the alternate to be used in	the state of Florida is:	
2. The nam	e and the Florida street addre	ess of the registered agent and of	ffice are:
	Corporation Service Com	pany	
		(Name)	2015 TALL/
	1201 Hays Street		
	Florida Street	Address (P.O. Box NOT ACCEPTABLE	SSEE 24
	Tallahassee	32301 FL	A 9.
		City/State/Zip	27 RIDA
liability com registered as statutes relati	pany at the place designated gent and agree to act in this o ting to the proper and comple	and to accept service of process for in this certificate, I hereby accep capacity. I further agree to comp tete performance of my duties, and egistered agent as provided for in	ot the appointment as ly with the provisions of all d I am familiar with and
	Corporation Service Compa	ару	Courtney Williams
	By:	<b>5</b>	Asst. Vice President
	(S	Signature)	<del></del>
	\$ 100. \$ 25. \$ 30.	.00 Designation of Registered	l Agent

\$ 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 "FAENA HOTELS AND RESIDENCES 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 TWENTY-THIRD DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "FAENA HOTELS AND RESIDENCES LLC" WAS FORMED ON THE TWENTY-FIRST DAY OF JULY, A.D. 2015.

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

5788972 8300

151084542

Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 2582561

DATE: 07-23-15

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