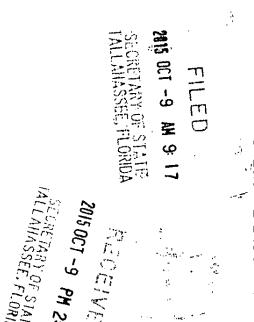
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 826407 7458099

AUTHORIZATION : Spelle le man

COST LIMIT : \$ 125.00

ORDER DATE: October 9, 2015

ORDER TIME : 10:59 AM

ORDER NO. : 826407-010

CUSTOMER NO: 7458099

FOREIGN FILINGS

NAME: 8901 AUSTIN HOTEL LESSEE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

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: 8901 Austin Hotel Lessee, 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 "Limited Liability Company," "L.L.C," or "LLC.") 46-5760184 Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) Upon acceptance of this Authorization to Transact Business (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 11770 N. US Highway 1, Suite 202 North Palm Beach, Florida 33408 (Street Address of Principal Office) 11770 N. US Highway 1, Suite 202 North Palm Beach, Florida 33408 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) David Buddemeyer Name: 11770 N. US Highway 1, Suite 202 Office Address: North Palm Beach , Florida 33408 Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: 8901 Austin Hotel Holdings, LLC, sole member

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

David Buddemeyer, Authorized Person

11770 N. US Highway 1, Suite 202

North Palm Beach, Florida 33408

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "8901 AUSTIN HOTEL LESSEE, 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 OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "8901 AUSTIN HOTEL LESSEE, LLC" WAS FORMED ON THE FIRST DAY OF MAY, A.D. 2014.

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

a at corn delaware gov/aut

Authentication: 10212034

Date: 10-09-15