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Y SULKER

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 010477 8049580

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: February 9, 2016

ORDER TIME : 2:27 PM

ORDER NO. : 010477-005

CUSTOMER NO: 8049580

#### FOREIGN FILINGS

NAME: LCD-HHC UNIVERSITY HOTEL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

#### **COVER LETTER**

TO:	Registration Section Division of Corporation	ns	,		
CHRIE	LCD-HHC Univer				
SUBJE			Limited Liability C	Company	
The end Existen	closed "Application by Fo	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limit	tion to Tra ed liabilit	ansact Business in Florida," Certificate of y company to transact business in Florida.
Please r	return all correspondence	concerning this matter to the	following:		
	Laura Haskins				
		N	ame of Person		
	Baker & Hoste	etler LLP			
	-	F	irm/Company		· · · · · ·
	1180 Peachtre	e Street, Suite 1800			
			Address		
	Atlanta, GA 3	0309			
	•	City/S	state and Zip Code		
	<del> </del>	E-mail address: (to be use	d for future annual	report no	tification)
For furt	ther information concerni	ng this matter, please call:			
	Carol McEwen		404 at (	256-82	45
	Name	of Contact Person	Area Code	Day	time Telephone Number
	MAILING ADDRESS Division of Corporation Registration Section			Division	F ADDRESS: of Corporations ion Section
	P.O. Box 6327 Tallahassee, FL 32314			Clifton E	
Enclose	ed is a check for the follow \$125.00 Filing Fee	wing amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate 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:

LCD-HHC University	Hotel LLC				
	reign Limited Liability Company; mu	ist include "Limited Liab	oility Company," "L.L.C.," or	"LLC.")	_
(If name unavailable, enter a Liability Company," "L.L.C	alternate name adopted for the purpos	se of transacting business	s in Florida. The alternate nam	ne must include "Lir	_ mited
Delaware	, or LEC. )	3. 81-0835798			
(Jurisdiction under the law company is organized)	of which foreign limited liability	3.	(FEI number, if applicable)	<del>"</del>	_
4. <sup>n/a</sup>					
· .	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida, if prior to	registration.)	-	
5. 455 Epps Bridge Park	way, Building 100 Suite 201		,	_	
Athens, GA 30606					
	(Street Address of I	Principal Office)		-	
6. 455 Epps Bridge Parky	way, Building 100 Suite 201			_	
Athens, GA 30606					
	(Mailing	Address)		• .***	
7. Name and street address	ss of Florida registered agent: (P.	.O. Box NOT accepta	ıble)	<u> </u>	
Name:	Corporation Service Company		-	137 B	- ; · j
Office Address:	1201 Hays Street		-	15.9 15.9 15.9 15.9 15.9 15.9 15.9 15.9	#2 m 45 g \$ 1 + 35 g
	Tallahassee		, Florida 32301	AH 8:	177
Registered agent's accep	(City)		(Zip code)	<u> </u>	-
Having been named as redesignated in this applicate to complywith the provisi	egistered agent and to accept servation, I hereby accept the appointions of all statutes relative to the my position as registered agent.  Corporation Service Compan  By:	tment as registered ag proper and complete	ent and agree to act in this	's capacity. I furti , and I am familia	her agree
	(Regist	tered agent's signature)	Asst. Vice	President	
8. The name, title or capa	acity and address of the person(s)	who has/have authori	ty to manage is/are:		
LCD-HHC, LLC, its men	nber				
455 Epps Bridge Parkway	y, Building 100 Suite 201				
Athens, GA 30606					
	h		n language, a translation of		
This document is executed	in accordance with section 605.0	1/		false information	
	the Department of State constitu				

J. Wesley Rogers, Authorized Signatory

Typed or printed name of signee

Page 1

## Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "LCD-HHC UNIVERSITY HOTEL, 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 FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LCD-HHC UNIVERSITY HOTEL, LLC" WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2015.

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

Authentication: 201802812

Date: 02-09-16

5839818 8300 SR# 20160685353