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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2016

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FRANK A CILIONE PO BOX 411 EAST HAMPTON, NY 11937

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SUBJECT: HOSPITALITY CAPITAL ADVISORS LLC Ref. Number: W16000007835

We have received your document for HOSPITALITY CAPITAL ADVISORS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 716A00002345

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www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee Florida 32314

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COVER LETTER

TO: Registration Section Division of Corporations

HOSPITALITY CAPITAL ADVISORS LLC

SUBJECT:

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:

	FRAM	VK A. CILIONE				
	Na	ame of Person			<u> </u>	
	HOSPITALIT	Y CAPITAL ADV	ISORS L	LC		
	Fi	rm/Company				
	Р	O BOX 411				
		Address				
	EAST HA	MPTON, NY 1193	37		TALL	2
	City/S	tate and Zip Code			EB	1
	FCILION	IE@GMAIL.COM	1			τí D
	E-mail address: (to be used	l for future annual	report noti	fication)	<u> </u>	D
For further information concerning	ng this matter, please call:				PH 4: 48	
FRA	NK A. CILIONE	917 at (923-89	00		
Name	of Contact Person	Area Code	Day	time Telephon	ne Number	
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division o Registrati Clifton Be 2661 Exce	ADDRESS: of Corporation on Section hilding cutive Center ee, FL 32301		
Enclosed is a check for the follow						
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	g ree &		Filing Fee, Certificat Certified Copy	e

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 60519	XO2, FEORIDA STATUTES, THE FC	DLLOWING IS SUBMITTED TO RI	EGISTER A FOREIGN	LIMITED LIABILIT	ſΥ
COMPANY TO TRANSACT BUSINESS IN T	THE STATE OF FLORIDA:				

name unavailable, enter alternate ability Company," "L.L.C," or "L		e of transacting	business in Florid	a. The alternate	name must include "Li	imited
DELAWARE		3.		27-1694521		
(Jurisdiction under the law of whi company is organized)	ch foreign limited liability		(FEI nu	mber, if applic	able)	_
<u> </u>				<u> </u>		
((Date first transacted busine See sections 605.0904 & 605	ess in Florida, if .0905, F.S. to d	prior to registration etermine penalty li	n.) ability)		
				<u> </u>		
44 THRI	EE MILE HARBOR RD, E	EAST HAMP	I'ON, NY 11937			
	(Street Address of I	Principal Office)			
	PO BOX 411 EAST H	AMPTON, N	r 11937		TALL TALL	
<u> </u>	(Mailing)	Address)			一译的 FEB 「	ή
Name and street address of F	e e .		acceptable)			
Name:	FRANK A. CILI	ONE	·			ч Ú
Office Address:	64 ALTON RD.,	A32				
	MIAMI BEAC	н	, Florida	33139	H8	
	(City)		, , , , , , , , , , , , , , , , ,	(Zip code)	
gistered agent's acceptance:						

1

(Registered agent s signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

FRANK A. CILIONE - MANAGING MEMBER - 64 ALTON RD. A32 - MIAMI BEACH, FL 33139

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. I 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.

FRANK A. CILIONE

Tuned or printed name of signee



Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "HOSPITALITY CAPITAL ADVISORS LLC", FILED IN THIS OFFICE ON THE ELEVENTH DAY OF JANUARY, A.D. 2010, AT 2:29 O'CLOCK P.M.

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4775575 8100 SR# 20160094815

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

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Authentication: 201693955 Date: 01-19-16

State of Delaware Secretary of State Division of Corporations Delivered 03:07 PM 01/11/2010 FILED 02:29 PM 01/11/2010 SRV 100026413 - 4775575 FILE

CERTIFICATE OF FORMATION OF HOSPITALITY CAPITAL ADVISORS LLC

• • •

The undersigned, being an authorized person for purposes of executing this Certificate of Formation on behalf of HOSPITALITY CAPITAL ADVISORS LLC, a Delaware Limited LiabilityCompany (the "L.L.C."), desiring to comply with the requirements of 6 <u>Del.C.</u> Section 18-201 and the other provisions of the Delaware Limited Liability Company Act, 6 <u>Del.C.</u> Section 18-101, <u>et seq</u>. (the "Act"), hereby certifies as follows:

1. <u>Name of the L.L.C.</u>- The name of the L.L.C. is: HOSPITALITY CAPITAL ADVISORS LLC

2. <u>Registered Office and Registered Agent of the L.L.C.</u> - The name of the registered agent for service of process on the L.L.C. in the State of Delaware is Agents and Corporations, Inc. The address of the registered agent of the L.L.C. and the address of the registered office of the L.L.C. in the State of Delaware is 1201 Orange Street, Suite 600, City of Wilmington, New Castle County, Delaware 19801.

3. <u>Date of Formation and Effective Date</u> - The date of formation and the effective date of the L.L.C. shall be the date of filing of this Certificate of Formation with the Secretary of State of the State of Delaware.

IN WITNESS WHEREOF, the undersigned hereby executes this Certificate of Formation in accordance with the provisions of 6 <u>Del.C.</u> Section 18-201 this 11th day of January, 2010.

C 下沿 David N. Williams ō (Authorized Person) 659 ł m 2 £