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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 17, 2016

FLORIDA FILING & SEARCH SERVICES, INC. ABBIE/PAUL HODGE

SUBJECT: ORLANDO GATEWAY HOTEL GROUP, LLC

Ref. Number: W16000011808

We have received your document for ORLANDO GATEWAY HOTEL GROUP, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Yasemin Y Sulker
Regulatory Specialist II

Letter: Number: 916A00003260

File date

Mank you

www.sunbiz.org

Division of Corporations P.O. P.O. P.O. Florida 32314

DEPARTMENT OF SIATION 52

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

02-16-16

NAME:

ORLANDO GATEWAY HOTEL GROUP, LLC

TYPE OF FILING: FOREIGN QUALIFICATION

COST:

155.00

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: ORLANDO HOTEL GROUP, 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:				
MaryAnn Powell				
(Name of Person)				
Registered Agents Legal Services LLC				
(I	Firm/Company)			
1013 Centre Road, Suite 403S				
(Address)				
Wilmington, DE 19805				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
MaryAnn Powell	at (302) 472-5226			
(Name of Person)	(Area Code & Daytime Telephone Number)			
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: \$\Bigsim \frac{1}{2}\$125.00 \text{ Filing Fee} \Bigsim \frac{1}{2}\$130.00 \text{ Filing Fee & Fee & Filing Fee & Fee Certificate of Status} \$\Bigsim \frac{1}{2}\$155.00 \text{ Filing Fee & Fee & Fee Certificate of Status} \Bigsim \frac{1}{2}\$160.00 \text{ Filing Fee, Certificate of Status} \Bigsim \text{ Certified Copy} \text{ of Status & Certified Copy} \Bigsim				

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

IN COMPILANCE 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:

Orlando Hotel Group, I			
•	eign Limited Liability Company; must include "L	imited Liability Company," "L.L.C.," or	"LLC.")
Orlando Gateway Hote			
(If name unavailable, enter al Liability Company," "L.L.C,	ternate name adopted for the purpose of transacti or "LLC.")	ng business in Florida. The alternate nan	ne must include "Limited
2. Delaware	. 3.		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	,
4			SAC SUNDESS
	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. to	, if prior to registration.) determine penalty liability)	
5. 1612 Thomas avenue			_
Charlotte, NC 28205			_
	(Street Address of Principal Offi	(ce)	
6. 1612 Thomas Avenue		<u></u>	_
Charlotte, NC 28205			
	(Mailing Address)		-
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		3 5	
Name:	Registered Agents Legal Services, LLC	·	
Office Address:	155 Office Plaza Drive, Suite A		3 6
	Tallahassee	, Florida 32301	កំណែ ស្រីស្ 🗫 ស៊ីស៊ី
	(City)	(Zip code)	9
designated in this applica- to complywith the provision	gistered agent and to accept service of proci tion, I hereby accept the appointment as reg ons of all statutes relative to the proper and my position as registered agent.	eistered agent and agree to act in this complete performance of my duties	lity company at the place is capacity. I further agree , and I am familiar with an
	-May Michkl	of MICHAELW	ASHLEY
	(Registered agont's	signature)	,
8. The name, title or capa	city and address of the person(s) who has/ha	ve authority to manage is/are:	
	1612 Thomas Avenue, Charlotte, NC 28203	· • • • • • • • • • • • • • • • • • • •	
			
	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is is shmitted)		
	Massion		
	Signature of an authori		•
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b), the Department of State constitutes a third d	Florida Statutes. I am aware that any	false information
and a second to	Michael Brown, Manager	-Chi servich am braiting a ser at 91911.	

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "ORLANDO HOTEL GROUP, 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 FEBRUARY, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ORLANDO HOTEL GROUP, LLC" WAS FORMED ON THE THIRD DAY OF FEBRUARY, A.D. 2016.

Authentication: 201835895

Date: 02-16-16