(((H16000072060 3)))

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Foreign Limited Liability Company SLB Hospitality, LLC

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S. YOUNG

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA H16000072060 3

Name: Office Address: Kissimmee (City) (Ci		(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")								
Delaware Applied for Turisdicate a under the law of which foreign limited liability (FEI number, if applicable) Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 603.0905, F.S. in determine pointly liability) 7675 West Irlo Bronson Highway, Kissimmee, Florida 34747 (Street Address of Frincipal Office) 7675 West Irlo Bronson Highway, Kissimmee, Florida 34747 (Malfing Address) Name and street address of Florida registored agent: (P.O. Box NOT acceptable) Name: Alfonso Borrero Name: Office Address: (City) (C	name unavailable, enter a	iternate name adopted for the purpose of transacti	ing business in Florida. The alternate name must	include "Limited						
Alfonso Borrero Name: Office Address: Name: Office Address: Name: Office Address: (City) gistered agent's acceptance: (City) gistered agent's acceptance: of the application, I hereby accept the appointment at registered agent and agree to net in this capacity. I further complywith the provisions of all statutes relative to the groper and complete performance of my duties, and I um familiar complywith the provisions of my position as registered agent's signature). The name, title or capacity and address of the person(a) who has/have authority to manage is/are: The name, title or capacity and address of the person(a) who has/have authority to manage is/are: The name, title or capacity and address of the person(a) who has/have authority to manage is/are: Tonso Borrero, Manager, 7675 West Irlo Bronson Highway, Klasimmec, Florida 34747 The name, title or capacity and address of the person(a) who has/have authority to manage is/are: Tonso Borrero, Manager, 7675 West Irlo Bronson Highway, Klasimmec, Florida 34747 Natached is a cortificate of existence, no more than 90 days old, duly muthenticated by the official having custody of records address or must be submitted) Signature of an authorized person s document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information as a document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information	• •	Apo	blied for							
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(Mairing Address) Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Alfonso Borrero Name: Office Address: Kissimmee (City) gistered agent's acceptance: Votag been named as registered agent and to accept service of process for the above stated limited liability company at the ignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I furth complying the provisions of all statutes relative to the proper and complete performance of my duties, and I um familian expt the obligations of my position as registered agent. (Registered agent's signature) The name, title or capacity and address of the person(s) who has/have authority to manage is/are: fonso Borrero, Manager, 7675 West Irlo Bronson Highway, Kissimmee, Florida 34747 ward Swain, Manager, 7675 West Irlo Bronson Highway, Kissimmee, Florida 34747 Attached is a cortificate of existence, no more than 90 days old, duly authenticated by the official having custody of records is addiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under the translator must be submitted) Signature of an authorized person statement is executed in accordance with section 605.0203 (1) (b), Fiorida Statutes, I am aware that any false information	7675 West Irlo Bronso	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. to a Highway, Kissimmee, Florida 34747	, if prior to registration.) o determine penalty liability)							
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Page 1

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

DELAWARE, DO HEREBY CERTIFY "SLB HOSPITALITY, 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 MARCH, A.D. 2016.

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

16 MAR 22 AM 9: 45

5989662 8300 SR# 20161682878

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

Julisay VI. Builica, Microsop of Brata

Authentication: 201992050

Date: 03-16-16

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