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TALLAHASSEE, FLORIDA
2016 NOV -7 PM 1:26

WOODSPRING HOTELS

November 4, 2016

Florida Department of State
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Application By Foreign Limited Liability Company

Dear Secretary:

Enclosed is an Application by Foreign Limited Liability Company for Authorization To Transact Business for filing on behalf of WoodSpring Hotels Property Management LLC. Also enclosed is a copy of the Certificate of Good Standing as issued by the Kansas Secretary of State.

We have enclosed our check in the amount of $1,840.00 for payment of the penalty fees, back annual reporting fees, and the application filing fees and certificate.

If you have any questions, please contact our office. We have enclosed a FedEX label for your convenience in returning the document to us. Thank you for your assistance in this matter.

Sincerely,

Leslie Fowler

Leslie Fowler
Real Estate Paralegal
(316) 631-1369

Enclosures

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**COVER LETTER**

**TO:** **Registration Section**
**Division of Corporations**

**SUBJECT:** WoodSpring Hotels Property Management 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:

Connie Wade
Name of Person

WoodSpring Hotels
Firm/Company

8621 E. 21st Street North, Suite 200
Address

Wichita, KS 67206
City/State and Zip Code

cwade@woodspring.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA
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For further information concerning this matter, please call:

Connie Wade at (316) 630-5552
Name of Contact Person — Area Code — Daytime Telephone Number

**MAILING ADDRESS:**
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

**STREET ADDRESS:**
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ $125.00 Filing Fee ■ $130.00 Filing Fee & Certificate of Status ☐ $155.00 Filing Fee & Certified Copy ☐ $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:*

1. WoodSpring Hotels Property Management 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.")

2. Kansas
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 20-0487842
(FEI number, if applicable)

4. January 1, 2006
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 8621 E. 21st Street North, Suite 250
Wichita, KS 67206
(Street Address of Principal Office)

6. 8621 E. 21st Street North, Suite 250
Wichita, KS 67206
(Mailing Address)

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TALLAHASSEE, FLORIDA

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: National Corporate Research, Ltd., Inc.

Office Address: 115 North Calhoun Street, Suite 4

Tallahassee (City), Florida 32301 (Zip code)

**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 comply with 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.***

Sheryl A Gibbs Asst Sec.
(Registered agent's signature)

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

WoodSpring Hotels Holdings LLC - member

8621 E. 21st Street North, Suite 250

Wichita, KS 67206

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.

Typed or printed name of signee

# STATE OF KANSAS
## OFFICE OF SECRETARY OF STATE
## KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 3559846

Entity Name: WOODSPRING HOTELS PROPERTY MANAGEMENT LLC

Entity Type: DOM: LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: KAREN PICKENS

Registered Office: 8621 E. 21ST STREET NORTH SUITE 250, WICHITA, KS 67206

was filed in this office on December 15, 2003, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

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TALLAHASSEE, FLORIDA
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In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of October 05, 2016

Kris W. Kobach

**KRIS W. KOBACH**
**SECRETARY OF STATE**

Certificate ID: 858586 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.