

MI700001546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

MI7000012104

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TALLAHASSEE, FLORIDA

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2017 FEB -9 PM 4:17

17 FEB -9 PM 4:17

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n BRUCE  
FEB 22 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 10, 2017

CSC  
COURTNEY WILLIAMS

SUBJECT: DESTINATION HOTELS AND RESORTS LLC  
Ref. Number: W17000012104

502494-5

**RESUBMIT**  
Please give original  
submission date as file date.

2017 FEB -9 A  
TALLAHASSEE, FL

**FILED**

We have received your document for DESTINATION HOTELS AND RESORTS LLC and the authorization to debit your account in the amount of \$. However, the document has not been filed and is being returned for the following:

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is F11000000896.

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.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 617A00002716

17 FEB 22 PM 2:00

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

ACCOUNT NO. : I200000000195

REFERENCE : 502496 5041389

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : February 8, 2017

ORDER TIME : 3:19 PM

ORDER NO. : 502496-005

CUSTOMER NO: 5041389

FOREIGN FILINGS

NAME: DESTINATION HOTELS AND  
RESORTS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: \_\_\_\_\_

FILED  
2017 FEB -9 A 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DESTINATION  
HOTELS & RESORTS

1177 San Vicente Boulevard, Suite 1000, Los Angeles, California 90049-4011 (tel. 310.820-6001 fax 310.207-1132)

February 21, 2017

Florida Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
2017 FEB - 9 A 9:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Destination Hotels and Resorts, Inc.  
F1100000896  
Consent to Use Name

To Whom it May Concern:

Please be advised that Destination Hotels and Resorts, Inc. ("DHR") has withdrawn its Authority to Transact Business in the State of Florida effective February 10, 2017. Attached is the filed Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida. DHR consents to the use of the name Destination Hotels and Resorts by Destination Hotels and Resorts LLC for purposes for qualifying to do business in Florida.

Please contact the undersigned if you have any questions.

Very truly yours,

Dona Tanaka  
Secretary

Attachment

**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. Destination Hotels and Resorts 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. California 3. 95-4205478  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. 10333 East Dry Creek Road, Ste. 450  
Englewood, CO 80112  
(Street Address of Principal Office)

6. 11777 San Vicente Blvd., Ste. 900  
Los Angeles, CA 90049  
(Mailing Address)

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

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (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.*

By: Courtesy Williams  
(Registered agent's signature) President

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

<u>James H. Sabatier, 10333 E. Dry Creek Rd., # 450, Englewood, CO 80112</u>	<u>Manager</u>
<u>Mark J. Hays, 10333 E. Dry Creek Rd., #450, Englewood, CO 80112</u>	<u>Manager</u>
<u>Omar Palacios, 11777 San Vicente Blvd., # 900, Los Angeles, CA 90049</u>	<u>Manager</u>

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]  
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.

Authorized Person  
Typed or printed name of signer

FILED  
2017 FEB - 9 A 9:40  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

# State of California

## Secretary of State

### CERTIFICATE OF STATUS

ENTITY NAME: DESTINATION HOTELS AND RESORTS LLC

FILE NUMBER: 201602010046  
FORMATION DATE: 01/19/2016  
TYPE: DOMESTIC LIMITED LIABILITY COMPANY  
JURISDICTION: CALIFORNIA  
STATUS: ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California,  
hereby certify:

The records of this office indicate the entity is authorized to  
exercise all of its powers, rights and privileges in the State of  
California.

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



IN WITNESS WHEREOF, I execute this  
certificate and affix the Great Seal  
of the State of California this day of  
February 8, 2017.

ALEX PADILLA  
Secretary of State

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