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To:		表して
	Division of Corporations	S 25 5 1
	Fax Number : (850)617-6383	ind =
From:		FIS =
	Account Name : C T CORPORATION SYSTEM	25
	Account Number : FCA000000023	27 5
	Phone : (512)418-6949	
	Fax Number : (954)208-0845	,\$*

Foreign Limited Liability Company Hotel 8629 International Opco GP, L.L.C.

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u Corporate Filing Menu	Help
	u Corporate Filing Menu

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

	TTION 605.0902, FLORIDA STATUTES, THE FOI USINESS INTHE STATE OF FLORIDA:	LLOWING IS SUBMITTED TO REGISTER A FOREK	W LIMITED LIABILITY
Hotel 8629 Internations			
		"Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter al Liablity Company," "L.L.C,	itemate name adopted for the purpose of transa	octing business in Florida. The alternate name must	include "Limited
2. Delaware	3		
(Jurisciction under the law company is organized)	of which foreign limited hability	(FEI number, if applicable)	
4.			
	(Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S	ids, if prior to registration.)	(B
5 1601 Washington Ave	nue, Suite 800		28 ヨイ
VI	A 1		强支一
Miami Beach, FL 331		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	弱して
	(Street Address of Principal C	•	SSR
6,			Fig. 3
			2011HAY -5 MILLING SECRETARY OF STATE
	(Mailing Address)		92 5
7. Name and street address	s of Florida registered agent: (P.O. Box.)	<u>NOT</u> acceptable)	<u> </u>
Name:	C T Corporation System		•
Office Address:	1200 South Pine Island Road		
Office Address.	Plantation	33324	
	(City)	, Florida 33324 (Zip sode)	
Registered agent's accep	tance:		
		ocess for the above stated limited liability con registered agent and agree to act in this capa	
		nd complete performance of my duties, and I	
accept the obligations of	my position us registered agent.	Joe Villeda	
	By: C T Corporation System	Assistant Secretary	
	(Registered agent	t's signature)	
8. The name, title or capa	icity and address of the person(s) who has	/have authority to manage is/are:	
Ruby Huang	•		
Authorized Signatory			_
591 West Putnam Avenue	c, Greenwich, CT 06830		_
		7	_
9. Attached is a certificate	of existence, no more than 90 days old do	ally authenticated by the official having custody is in a foreign-language, a translation of the ce	y of records in the
of the translator must be su		is in a foreign-anguage, a translation of the ce	rimeate under oati:
	Signature of an auth	vorized person	
This decument is accomed	Limited the second	(b), Florida Statutes. I am aware that any false i	information
		d degree felony as provided for in s.817.155, F	

Typed or printed name of signee

Ruby Huang

Delaware The First State

Page 1

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

DELAWARE, DO HEREBY CERTIFY "HOTEL 8629 INTERNATIONAL OPCO GP,

L.L.C." 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 FOURTH DAY OF MAY, A.D. 2017.

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

FILEU SECRETARY OF STATE

12

6400219 8300 SR# 20173091290

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

Justiney W. Wullack, Environcy of State

Authentication: 202486982

Date: 05-04-17