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S. WARREN 0CT 0 9 2017 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195 REFERENCE : 850376 7862578 AUTHORIZATION : The second sec				
ORDER DATE : October 6, 2017				
ORDER TIME: 10:04 AM				
ORDER NO. : 850376-030				
CUSTOMER NO: 7862578				
FOREIGN FILINGS				
NAME: GAHC4 RENAISSANCE FL TRS SUB, LLC				
XXXX QUALIFICATION (TYPE: <u>LL</u>)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				

EXAMINER:

CONTACT PERSON: Melissa Zender -- EXT# 62956

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 HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. GAHC4 Renaissance F	L TRS Sub, LLC	·	
(Name of Foreign	Limited Liability Company, must include "Limited	f Liability Company," "L L C ," or "LL	C.")
If name unavailable, enter alternate n	aine adopted for the purpose of transacting business in Flor	oda. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC,")
Delaware		3. 82-2788091	
(Junsdiction under the law of w	hich foreign limited liability company is organized)		number, if applicable)
Upon Qualification			
	(Date first transacted business in Florida, if prior to r (See sections 605,0904 & 605,0905, F.S. to determine	egistration.) te penalty hability)	
5. 18191 Von Karman A		6. 18191 Von Karman Av	enue, Suite 300
(Street Address of I Irvine, CA 92612	Principal Office)	(Mailing Irvine, CA 92612	Address)
1141110; C71 72012		11 vine, CA 72012	
		· · · · · · · · · · · · · · · · · · ·	The state of the s
7. Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)	SSA 6 E
	Corporation Service Company	<u></u>	
Name:			ST ST
Office Address:	1201 Hays Street	 _	AM II: OU OF STATE
	Tallahassee	. Florida 32301	→ • • • • • • • • • • • • • • • • • • •
Registered agent's accep	(Cuy)	(Zip	code)
8. The name, title or capa Title or Capacity:	Corporation Service Company By: (Registered agent's service) and address of the person(s) who has	/ s/have authority to manage is/ar	
	Name and Address:	Title or Capacity:	Name and Address:
Sole Member	GAHC4 TRS Peninsula Holdings, LLC 18191 Von Karman Avenue, Sixte 300		
	Irvine, CA 92612		

(Use attachments if necess	sary)		
urisdiction under the law of the translator must be so 0. This document is execu	of existence, no more than 90 days old, dof which it is organized. (If the certificate abmitted) uted in accordance with section 605.0203 the Department of State constitutes a this	is in a foreign language, a trans	station of the certificate under oath
atwo in a document to	The Department of State Constitutes a fifth	reactive reiony as provided for	m 3.017.100, t.o.
	Signature of	f an authorized person	
		•	
		Streiff	<u></u>
	By TRS Peninsula Holdings, LLC, its Sole Men By Mathieu Streiff, Executive Vice President a		

Page 1



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

DELAWARE, DO HEREBY CERTIFY "GAHC4 RENAISSANCE FL TRS SUB, 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 SIXTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GAHC4"

RENAISSANCE FL TRS SUB, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF

SEPTEMBER, A.D. 2017.

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

Authentication: 203354543

Date: 10-06-17

6561567 8300 SR# 20176505533