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18 JAN 25 AM 9: 14

K SALY JAN 26 2018 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	;	120	0 (00	0	0	0	1	9	5
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REFERENCE : 039346 8056587

AUTHORIZATION : THE BELLEN

COST LIMIT : \$ 125.00

ORDER DATE: January 24, 2018

ORDER TIME : 9:58 AM

ORDER NO. : 039346-020

CUSTOMER NO: 8056587

FOREIGN FILINGS

NAME: BSREP II WS HOTEL TRS SUB LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

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

	TION 605.0902, FLORIDA STATUTES, THE FOLLOWIN ISINESS IN THE STATE OF FLORIDA:	G IS SUBMITTED TO REGISTER A I	FOREKIN TAMITED TABILITY
BSREP II WS Hotel TE	RS Sub LLC		
i .	eign Limited Liability Company; must include "Limited	1 Hability Company," "L.L.C.," or	T.I.C.")
If name unavailable, enter al Liability Company," "L.L.C.	ternate name adopted for the purpose of transacting bu	siress in Florida. The alternate nam	e must include "Limited
, DE	3 82-3905	921	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
, 01/15/2018			
·	(Date first transacted business in Florida, if pr	ior to registration.)	. 0
1997 Annapolis Eveba	(See sections 605,0904 & 605,0905, F.S. to detecting Pkwy., Ste. 550, Annapolis, MD 21401	rmine penany habinty)	18 1VIS
5	inge (kwy., Ste. 550, Atmapona, 146 21 to)		18 JAN 25
			2 95
	(Street Address of Principal Office)		11: - (
6. 1997 Annapolis Exchar	nge Pkwy., Ste. 550, Annapolis, MD 21401		A 9: 14
			9: 14 9: 14
	(Mailing Address)		一一
7. Name and street addres	ss of Florida registered agent: (P.O. Box NOT ac	:c e ptable)	
	Corporation Service Company		
Name:		+	
Office Address:	1201 Hays Street	 	
	Tallahassee	. Florida <u>32301</u>	
	(City)	(Zip code)	-
designated in this applicate to complywith the provision	tance: gistered agent and to accept service of process fation. I hereby accept the appointment as register ons of all statutes relative to the proper and coming position as registered agent. Corporation Service Company By:	ed agent and agree to act in thi	s capacity. I further agree
	(Registered agent's signa	ture)	•
8. The name_title or caps	acity and address of the person(s) who has/have a	thority to manage is/are:	
•	Iotel TRS LLC, c/o Thayer Lodging, 1997 Annap		, Annapolis, MD 21401
			
	of existence, no more than 90 days old, duly authof which it is organized. (If the certificate is in a submitted) Signature of an authorized process.	creign language, a translation of	
	Signature of an authorized p	erson	-
	f in accordance with section 605.0203 (1) (b), Floothe Department of State constitutes a third degre	rida Statutes. I am aware that any	
	Michael Zink, Authorized Person		

Typed or printed name of sigree

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "BSREP II WS HOTEL 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 TWENTY-FOURTH DAY OF JANUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BSREP II WS HOTEL TRS SUB LLC" WAS FORMED ON THE FIFTH DAY OF JANUARY, A.D. 2018.

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

18 JAN 25 AM 9: 14

Authentication: 202029699

Date: 01-24-18

6696**1**68 8300 SR# 20180475689

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