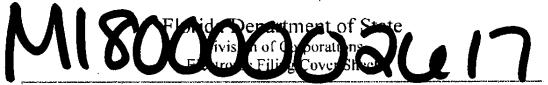
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Division of Corporations



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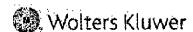
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Julie Outlaw Associate Fulfillment Specialist Fulfillment Operations CT Corporation

Team (614) 280-3338
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2017

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

	TION 605.0902, FLORIDA STATUI ISINESS INTHE STATE OF FLORI		UBMITTED TO REGISTER A	FOREIGN L	IMITED.	LIABILITY
, Hotel Norfolk Opco GI	P. L.L.C.					
	eign Limited Liability Company; r	nust include "Limited Fjab	lity Company," "L.L.C.," or	"LLC.")		
		40				
Liability Company," "L.L.C."	ternate name adopted for the purp " or "LLC.")	-	in Florida. The alternate nat	ne must inch	ide "Lim	ited
2. Delaware		3. 82-4742551				
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)		
4.	(Date first transacted bus (See sections 605,0904 & 60	iness in Florida, if prior to	registration.)			
5. 1601 Washington Ave	_					
Mismi Beach, FL 331	39			AL SE	201	
	(Street Address o	of Principal Office)			MAR	14
ŭ				- ASS	75 TS	busin augus
	(Mailin	ng Address)		– m̃~		i i
7. Name and street address	ss of Florida registered agent:	(P.O. Box NOT accepts	ible)	F. 5	A	
Name:	C T Corporation System				7 6	The same
Office Address:	1200 South Pine Island Rose	d		**		
	Plantation		, Florida <u>33324</u>	_		
Registered.agent's accep		دامو .	(Zip code)			
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept s tion, I hereby accept the appo ons of all statutes relative to the my possition as rogistyred agen	intment as registered ag he proper and complete d.	ent and agree to act in th	is capacity. s, wid I am	. I furth	er agree
	O (Reg	gistered agent's signature)				
8. The name, title or capa Nick Antonopoulos	acity and address of the person	(s) who has/have authori	ity to manage is/are:			
Senior Vice President						
591 West Putnam	Ave, Greenwich, CT 06830	0				
		.75				
 Attached is a certificate jurisdiction under the law of the translator must be s 	of existence, no more than 90 of which it is organized. (If the ubmitted)	days old, duly autheration a certificate is in a folloge	ated by the official having in language, a translation of	custody of of the certifi	records cate und	in the ler oath
	V					
	Signati	ure of an authorized persor)			
This document is executed submitted in a document to	d in accordance with section 60 the Department of State const	5.0203 (1) (b), Florida S titutes a third degree fold	Statutes. I am aware that an my as provided for in s.81	y false info 7.155, F.S.	rmation	
	Nick Antonopoulos	.=				
	Typed c	or printed name of signer		-		

1.5

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HOTEL NORFCEN 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 FIFTEENTH DAY OF MARCH, A.D. 2018.

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

6777645 8300

SR# 20181936752
You may verify this certificate online at corp.delaware.gov/authver.shtml

Jeffrey M. Bulliate, Secretary of State

Authentication: 202325361

Date: 03-15-18