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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

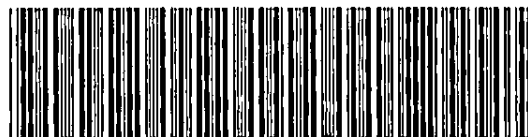
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MAIL

(Business Entity Name)

(Document Number)

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



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11/07/18--01012--024 \*\*390.00

Special Instructions to Filing Officer:

*Leslie Fowler* HAVE

AUTHORIZATION BY PHONE TO

CORRECT *Named RA*

DATE *11/29/18*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

18 NOV - 7 PM 5:54

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NOV 30 2018

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** BSREP II WS Tampa Brandon LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Leslie Fowler

\_\_\_\_\_  
Name of Person

Brookwood Hotels

\_\_\_\_\_  
Firm/Company

8621 E 21st Street North, Suite 200

\_\_\_\_\_  
Address

Wichita, KS 67206

\_\_\_\_\_  
City/State and Zip Code

lfowler@brookwoodhotels.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Fowler

316 631-1369  
at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy

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. BSREP II WS Tampa Brandon LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "L.L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")

2. Kansas 3. \_\_\_\_\_  
(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. Brookwood Hotels 6. Brookwood Hotels  
(Street Address of Principal Office) (Mailing Address)  
8621 E 21st Street North, Suite 200 8621 E 21st Street North, Suite 200  
Wichita, KS 67206 Wichita, KS 67206

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.

Judith Reyes  
(Registered agent's signature) Judith Reyes  
Assistant Secretary

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Secretary/Sr Counsel</u>	<u>Laura Schoenberger</u> <u>8621 E 21st Street North, #200</u> <u>Wichita, KS 67206</u>	_____	_____
<u>Treasurer</u>	<u>Ryan Willey</u> <u>1997 Annapolis Exchange Pkwy</u> <u>Annapolis, MD 21401</u>	_____	_____

(Use attachments if necessary)

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)

10. 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.

Laura Schoenberger  
Signature of an authorized person

Laura Schoenberger

Typed or printed name of signer

FILED  
18 NOV -7 PM 5:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATE OF KANSAS**  
**OFFICE OF**  
**SECRETARY OF STATE**  
**KRIS W. KOBACH**

, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that  
according to the records of this office.

Business Entity ID Number: 9177767

Entity Name: BSREP II WS TAMPA BRANDON LLC

Entity Type: KANSAS LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: CORPORATION SERVICE COMPANY

Registered Office: 2900 SW Wanamaker Drive Suite 204, TOPEKA, KS 66614

was filed in this office on October 03, 2018, and is in good standing, having fully complied  
with all requirements of this office.

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



In testimony whereof I execute this certificate and affix  
the seal of the Secretary of State of the state of Kansas  
on this day of October 22, 2018

**KRIS W. KOBACH**  
**SECRETARY OF STATE**

Certificate ID: 1083600 - To verify the validity of this certificate please visit  
<https://www.kansas.gov/bess/flow/validate> and enter the certificate ID number.