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CORPORATE ACCESS, _____

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INC.

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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	CH PENSACOLA, LLC		
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AL I	INSTRUCTIONS:		

COVER LETTER

TO:		ation Section n of Corporation	ns				
SUBJE		l Pensacola, LLC					
001001	<u> </u>		Name of	Limited Liability (Company		
The end Existen	closed "A ice, and cl	pplication by For heck are submitte	reign Limited Liability Comp d to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	unsact Business in Florida," Certific company to transact business in	icate of Florida.
Please	return all	correspondence c	concerning this matter to the	following:			
		Valerie Cook					
			N	ame of Person			
		Maynard Coop	er & Gale, P.C.				
	Firm/Company						
		1901 6th Avenu	ue North, Suite 2400				
				Address			
		Birmingham,	AL 35203				
			City/S	tate and Zip Code			
		vcook@maynard	lcooper.com				
	•		E-mail address: (to be used	for future annual	report not	ification)	
For fur	ther infor	mation concernin	g this matter, please call:				
	Valerie	Cook		205 _ at (488-35	02	
		Name o	of Contact Person	Area Code	Day	time Telephone Number	
	Divisio: Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314			Division Registrate Clifton B 2661 Exc	ADDRESS: of Corporations ion Section uilding cutive Center Circle cc, FL 32301	
Enclose		eck for the follow i.00 Filing Fee	ing amount: \$\int\$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Certifica of Status & Certified Copy	le

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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:

	Limited Liability Company; must include "Limite	ed Liability Company," "L.L.C.," or "LLC."		- ~->
				2019
(II name unavailable, enter alternate n	same adopted for the purpose of transacting business in Flo	inda. The alternate name must include "Limited Lia	bility Company," "LIZC," or "LL	نت
2. Delaware		3. 83-2484934		至
faramention mater the law of w	hich foreign limited liability company is organized)	(छ। भ्यान	ber, if applicable)	٥
4			(J. 47.	-
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determi	registration.) ine pensity liability)		工
5. 5005 LBJ Freeway		6	्राप्त्र स्वाह	ج خ
(Street Address of I	'rincipal Office)	(Mailing Add	ress) [7]	ွှဲ
Suite 1200				-
Dallas, TX 75242				
7 Name and stood odder	or affiliation of the color of the color	NOT.		
. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)		
Name:	Registered Agent Solutions, Inc.			
Office Address:	155 Office Plaza Dr. Suite A			
	Tallahaman			
	Tallahassee (City)	, Florida 32301 (Zip cod	 _	
	s of my position as registered agent. Jack	yn Wright, Asst.	Secretary	
	(Registered agent's s	inglature)	- 0	
8. The name, title or capa <u>Title or Capacity:</u>	(Registered agent's s city and address of the person(s) who has Name and Address:		Name and Address:	
8. The name, title or capa <u>Title or Capacity:</u> Member	city and address of the person(s) who has	s/have authority to manage is/are: Title or Capacity:		
Title or Capacity:	city and address of the person(s) who has Name and Address:	s/have authority to manage is/are: Title or Capacity:		
Title or Capacity:	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200	s/have authority to manage is/are: Title or Capacity:		
Title or Capacity:	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 Charles A. Omage	s/have authority to manage is/are: Title or Capacity:		
Title or Capacity: Member	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 Charles A. Omage 5005 LBJ Freeway, Suite 1200	s/have authority to manage is/are: Title or Capacity:		
Member Special Member	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 Charles A. Omage 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242	s/have authority to manage is/are: Title or Capacity:		
Member Special Member	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 Charles A. Omage 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242	s/have authority to manage is/are: Title or Capacity:		
Title or Capacity: Member Special Member Use attachments if necess Attached is a certificate arisdiction under the law of	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 Charles A. Omage 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 ary) of existence, no more than 90 days old, dof which it is organized. (If the certificate	s/have authority to manage is/are: Title or Capacity:	Name and Address:	in the
Title or Capacity: Member Special Member Use attachments if necess Attached is a certificate arisdiction under the law of the translator must be su This document is executed.	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 Charles A. Omage 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 ary) of existence, no more than 90 days old, dof which it is organized. (If the certificate	s/have authority to manage is/are: Title or Capacity: State of C	ving custody of records on of the certificate und	er oath
Title or Capacity: Member Special Member Use attachments if necess Attached is a certificate curisdiction under the law of the translator must be su This document is executed.	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 Charles A. Omage 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 ary) of existence, no more than 90 days old, dof which it is organized. (If the certificate bmitted) ated in accordance with section 605.0203 the Department of State constitutes a thir Docustional by: Charles A. Omage	s/have authority to manage is/are: Title or Capacity: July authenticated by the official have is in a foreign language, a translation of the company of th	ving custody of records on of the certificate und	er oath
Title or Capacity: Member Special Member Use attachments if necess Attached is a certificate curisdiction under the law of the translator must be su This document is executed.	city and address of the person(s) who has Name and Address: Encore Hospitality Fund II, LP 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 Charles A. Omage 5005 LBJ Freeway, Suite 1200 Dallas, TX 75242 ary) of existence, no more than 90 days old, dof which it is organized. (If the certificate bmitted) ated in accordance with section 605.0203 the Department of State constitutes a thir Docustional by: Charles A. Omage	s/have authority to manage is/are: Title or Capacity: State of C	ving custody of records on of the certificate und	er oath

Typed or printed name of signee

Page 1

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "EH PENSACOLA, 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 FOURTH DAY OF JANUARY, A.D. 2019.

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

Authentication: 202020275

Date: 01-04-19

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