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To:

Division of Corporations
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From:

Account Name : LOWMEYER, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407) 843-4600
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Attorney at Law

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company WST 1000 Water Street Hotel LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Y SCOTT

AUG 7 2019

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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:

1. WSI 1000 Water Street Hotel LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," "L.L.C." or "LLC.")

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

2. Delaware Applied for
(Jurisdiction under the law of which foreign limited liability company is organized) (If not member, it applies none)

4. Upon qualification
(Date first transacted business in Florida, if prior to registration)
(State number (000,000-1 to 999,999), F.S., to determine priority liability)

5. 401 East Jackson Street 6. 401 East Jackson Street
(Street Address of Principal Office) (Mailing Address)
Suite 3300 Suite 3300
Tampa, Florida 33602 Tampa, Florida 33602

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporate Creations Network Inc.
Office Address: 11380 Prosperity Farms Road #221E
Palm Beach Gardens 33410
Florida (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.

Caitlin Lazarus, Special Secretary

(Registered agent's signature)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

Title or Capacity: Name and Address:

☐ Manager Name: Water Street Tampa LLC

☒ Member Address: 401 East Jackson Street

☐ Authorized Suite 3300

Person Tampa, Florida 33602

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

Title or Capacity: Name and Address:

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other ☐ Other

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

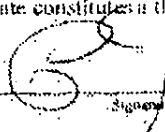
Person _____

☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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 605.0202 (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.817.135, F.S.



 Signature of an authorized person

Peter L. Lopez

 Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WST 1000 WATER STREET HOTEL 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 FIFTH DAY OF AUGUST, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "WST 1000 WATER STREET HOTEL LLC" WAS FORMED ON THE SECOND DAY OF AUGUST, A.D. 2019.

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

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2019 AUG-6 PM 4:11
SECRETARY OF STATE
DELAWARE



7544442 8300

SR# 20196328380

You may verify this certificate online at corp.delaware.gov/authver.shtmlHandwritten signature of Jeffrey W. Bullock, Secretary of State.
Jeffrey W. Bullock, Secretary of State

Authentication: 203346287

Date: 08-05-19