(Ř	equestor's Name)				
(A	ddress)				
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(C	ity/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(B	usiness Entity Name)				
(Document Number)					
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. :

120000000195

REFERENCE

COST LIMIT :

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ORDER DATE: November 6, 2019

ORDER TIME : 9:57 AM

ORDER NO. : 038080-005

CUSTOMER NO: 4322604

FOREIGN FILINGS

NAME: ASHFORD SARASOTA LEASING LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

_ PLAIN STAMPED COPY

__ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

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

	sing LLC			7 · c	<u></u>	
(Name of Foreign	Liability Company,	ty Company," "L.L.C.," or "LLC.")				
name unavailable, enter alternate	name adopted for the purpose of transacting business in Florid	da. The alternate name i	must include "Limite	d Liability Con	npany;™™L.L.	C,"'or "LLC.")
Delaware		84-1985	584	<u></u>	PH	
(Junsdiction under the law of which foreign limited liability company is organized)		3	(FEE	number, if app		<u>'</u> '
				200 A	36	
				ン		
	(Date first transacted business in Florida, if prior to reg (See sections 605.0904 & 605.0905, F.S. to determine	ristration.) penalty liability)				
14185 Dallas Parkway			ıllas Parkway,	Suite 1100	n	
(Sircei Address of		6	·	Address)		
	·		_	, , 104, 622,		
Dallas, Texas 75254		Dallas, T	exas 75254			
		•				
Name:	Corporation Service Company					
Name: Office Address:	Corporation Service Company 1201 Hays Street					
	1201 Hays Street Tallahassee	, Fi	orida <u>32301</u>			
	1201 Hays Street	, Fi		o code)		
Office Address: Sistered agent's accepting been named as resignated in this applications omply with the provisi	Tallahassee (City) tance: gistered agent and to accept service of protion, I hereby accept the appointment as rions of all statutes relative to the proper at so f my position as registered agent.	ocess for the above gistered agent in a complete per	(Zip	ited liabilit	capacity.	I further ag
Office Address: gistered agent's accep ving been named as re ignated in this application	Tallahassee (City) tance: rgistered agent and to accept service of protion, I hereby accept the appointment as relons of all statutes relative to the proper an	ocess for the above gistered agent in a complete per	ve stated limi and agree to formance of i	ited liabilit	capacity. and I am	I further ag

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:	Title or Capacity:	Name and Address:					
Manager	Name: Robert G. Haiman	Manager	Name: Christopher A. Peckham					
□Member	Address: 14185 Dallas Pkwy, Ste. 1100	Member	Address: 14185 Dalfas Pkwy, Ste. 1100					
□Authorized	Dallas, Texas 75254	☐ Authorized	Dallas, Texas, 75254					
Person		Person	Siery, B					
Other	Other	Other	Other S					
Manager	Name:	☐ Manager	Name:					
Member	Address:	☐ Member	Address:					
Authorized		Authorized						
Person		Person						
Other	Other	Other	Other					
☐Manager	Name:	☐ Manager	Name:					
☐ Mc mber	Address:	☐ Member	Address:					
□Authorized		Authorized						
Person		Person						
Other	Other	Other	Other					
indexed individuals 9. Attached is a certi jurisdiction under the	se an attachment to report more than six (6). I may be added to the index when filing your Flicate of existence, no more than 90 days old, a law of which it is organized. (If the certificat to be submitted)	duly authenticated by the	Annual Report form. official having custody of records in the					
10. This document is submitted in a docum	executed in accordance with section 605.020 nent to the Department of State constitutes a th	ird degree felony as provid	I am aware that any false information led for in s.817.155, F.S.					
	Signature	of an authorized person						
Christopher Peckham								

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 "ASHFORD SARASOTA LEASING 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 SIXTH DAY OF NOVEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ASHFORD SARASOTA

LEASING LLC" WAS FORMED ON THE FOURTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN

ASSESSED TO DATE.

Authentication: 203952215

Date: 11-06-19