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Foreign Limited Liability Company REILLY HOTEL ADVISORS, LLC

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

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: Reilly Hotel Advisors, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LL.C." or "LLC.") (If name unavailable, omer alternate name adopted for the purpose of transacting business in Florida. The alternate name most include "Limited Liability Company," "L.L.C," or "LLC.") 3. 20-0367303 Delaware (FE number, if applicable) (lurisdiction under the law of which foreign himted hability company is organized) (Date first transpored business in Florida, if prior to registration.) (See sections 605 0904 & 605,0905, F.S. to determine penalty liability.) 6. 2021 N. Atlantic Ave., #228 5. 3160 N. Atlantic Ave., A202 (Maiking Address) (Street Address of Principal Office) Cocoa Beach, FL 32931 Cocoa Beach, FL 32931 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Capitol Corporate Services, Inc. Name: 515 East Park Avenue 2nd Fl Office Address: , Florida 32301 Tallahassee 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. Kim Tadlock, Assistant Secretary ôn behalf of Capitol Corporate Services, Inc. Kim Tadlock (Registered agent's signature) \sim 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity: Name and Address: Title or Capacity: E. Donald Reilly, Jr Manager 2021 N. Atlantic Ave., #228 Cocoa Beach, FL 32931 (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. Signature of an authorized person

Typed or printed name of signee

E. Donald Reilly, Jr.



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "REILLY HOTEL ADVISORS, 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 TWENTY-SECOND DAY OF JANUARY, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REILLY HOTEL ADVISORS, LLC" WAS FORMED ON THE SEVENTH DAY OF MARCH, A.D. 2001.

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

Authentication: 202234491

3365726 8300 SR# 20200460801

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

Date: 01-22-20