

N 2000005241

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000178688 3)))



H200001786883ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-0821
Fax Number : (850)558-1515

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**Foreign Limited Liability Company
SBE HOTEL LICENSING, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$902.50

Electronic Filing Menu

Corporate Filing Menu

Help

H20000178688 3

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

IN COMPLIANCE WITH SECTION 606.02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. **SHE Hotel Licensing, LLC**

(Name of foreign limited liability company, must include "limited liability company," "LLC," or "L.L.C.")

(If the company is a foreign limited liability company, it must be organized in the state or country of its formation. The company name must include "limited liability company," "LLC," or "L.L.C.")

2. **Nevada**

(Jurisdiction under the law of which the foreign limited liability company is organized)

3. **06-01-2018**

(Date when the company was first organized in its jurisdiction, or the date when the company was first organized in the state or country of its formation, or the date when the company was first organized in the state or country of its formation, or the date when the company was first organized in the state or country of its formation)

4. **9247 Alden Drive**

(Principal address of foreign company)

Beverly Hills, CA 90210

9247 Alden Drive

(Principal address)

Beverly Hills, CA 90210

5. Name and street address (if Florida registered agent; P.O. Box: NOT acceptable)

Company: **Corporation Service Company**

Office Address: **1201 Hays Street**

Tallahassee

32301

(City)

, Florida

(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.

(Registered agent's signature)

H20000178688 3

H20000176666 3

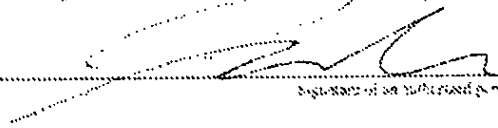
8. For initial filing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>Sam Nazarian</u>	☐ Manager	Name: _____
☐ Member	Address: <u>9247 Alden Drive</u>	☐ Member	Address: _____
☒ Authorized	<u>Beverly Hills, CA 90210</u>	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ 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 605.0203 (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. 817.135, F.S.



 Signature of an authorized person
Joshua Che

 Typed or printed name of signer

H20000176666 3

H20000176686 3

SECRETARY OF STATE

CERTIFICATE OF EXISTENCE
WITH STATUS IN GOOD STANDING2020 JUN 12 PM 4:46
FILED
CLERK OF COURT
CLERK OF COURT

I, Barbara K. Cegavske, the duly qualified and elected Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporations sole, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **SBE HOTEL LICENSING, LLC**, as a **DOMESTIC LIMITED-LIABILITY COMPANY** (86) duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since 12/21/2012, and is in good standing in this state.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 06/11/2020.

A handwritten signature in cursive script that reads "Barbara K. Cegavske".

BARBARA K. CEGAVSKE
Secretary of State

Certificate Number: B20200611853224

You may verify this certificate
online at <http://www.nvsos.gov>

H20000176686 3