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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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FEB 1 8 2022 K. Brumbley CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT NO.	:	I2000000	195	
	REFERENCE	:	438789	8336674	
	AUTHORIZATION	:	000		
	COST LIMIT	.C	greed ble	nan	
ORDER DATE :	January 27, 2022				
ORDER TIME :	1:57 PM				
ORDER NO. :	438789-105				
CUSTOMER NO:	8336674				
		• -			

FOREIGN FILINGS

NAME: AVANTSTAY SOUTHEAST, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

COVER LETTER

erib ir	AvantStay Southeast, LLC	
SUBJE		of Limited Liability Company
		ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florid
Please	return all correspondence concerning this matter to	the following:
	Melissa G. Kostrzewski	
		Name of Person
	Corporation Services Company	
		Firm/Company
	1201 Hays Street	
		Address
	Tallahassee, FL 32301	
	Cit	y/State and Zip Code
	melissa.kostrzewski@cscglobal.com	
	E-mail address: (to be t	used for future annual report notification)
For furt	ther information concerning this matter, please call:	
	Melissa G. Kostrzewski	800 927-9801 at ()
	Name of Contact Person	Area Code Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
	Enclosed is a check for the following amount:	Tallahassee, FL 32303

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. AvantStay Southeast	Limited Liability Company; must include "Lim	ated Liability	Company " I C " or "[[C"]	
(Name of Foleign	Entitled Flability Company, these include Tall	inco triatimi	Company, there or electric	
(If name unavailable, enter alternate	name adopted for the purpose of transacting business i	n Florida The	alternate name must include "Limited Lie	ability Company," "L.L.C," or "L1,C,")
Delaware		3		
2. (Jurisdiction under the law of w	hich foreign limited liability company is organized)	3.	(FEI aumb	er, if applicable)
4				
	(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to dete	r to registration ermine penalty	tiability)	
750 N San Vincente	Blvd		PO BOX 35539	
5. (Street Address of Principal Office)		٥.	(Mailing Address)	
West Hollywood, CA	90069		Los Angeles, CA 90035	
 Name and street address Name: 	cs of Florida registered agent: (P.O. B	Sox <u>NOT</u>	acceptable)	2022 FEB 1 8
Office Address:	1201 Hays Street			NO PM
	Tallahassee		32301 , Florida	2: 24
	(City)		(Zip code)	
designated in this applica to comply with the provisi	stance: registered agent and to accept service of stion, I hereby accept the appointment ions of all statutes relative to the prop s of my position as registered agent. Corporation Service Company By:	t as regist	ered agent and agree to act i	n this capacity. I further ag
	(Registered agen	n's signature)		

Title or Capacity:	Name and Address:	Title or Capacit	ty:	Name and Address:
□Manager	Name:	□Manager	Name:	
□Member	Address: 750 N San Vincente Blvd	□Member	Address: _	
■Authorized	West Hollywood, CA 90069	□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		\Box Authorized		
Person		Person		
□Other	Other	□Other		Other
9. Attached is a cert jurisdiction under th of the translator mus	se an attachment to report more than six (6) may be added to the index when filing your iticate of existence, no more than 90 days of e law of which it is organized. (If the certificate be submitted) sexecuted in accordance with section 605.0 ment to the Department of State constitutes a	Florida Department of St d, duly authenticated by t cate is in a foreign langua 203 (1) (b), Florida Status	ate Annual Rep the official havinge, a translation tes. I am aware	nort form. Ing custody of records in the certificate under customer that any false information
	Signatu	ire of an authorized person		
	Jesse Suarez	·		

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "AVANTSTAY SOUTHEAST, 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 EIGHTEENTH DAY OF FEBRUARY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AVANTSTAY SOUTHEAST, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 2022.

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

Authentication: 202701357

Date: 02-18-22