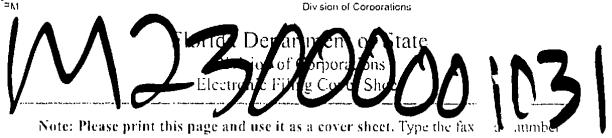
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·			124.
Doing so will generate another cover sheet.			

To:

Division of Corporations

Fax Number : (850)617-6383

Enom:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA003000023 Phone : (954)208-0845 Fax Number : (614)573-3996

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please, ** courtney.bleakley@marriott.com

Email Address:____

Foreign Limited Liability Company Courtyard Management LLC

Certificate of Status	. 0
Certified Copy	1
Page Count	. 04
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

, Courtyard Management LLC

To.

Assistant Secretary

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

IN COMPLIANCE WITH SECTION (05/00), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS INTHE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in	Horida. The alternate name must melixle "Limited Etability Company	1.1.1. or "l
Delaware		52-1481337 3	
thursdiction under the law of w	high foreign handed liability company is organized;	(FEI number, d'applicable)	(C)
Upon Filing			دري :-
·	(Date first transacted business in Florida, if given to (See Sections 645 (991) & 605 (995), F.S. to deter-	to registration () namely parameters ()	ζ., Γι.,
7750 Wisconsin Aven	ae.	7750 Wisconsin Avenue.	
reet Address of Principal Office)	····	(Mading Address)	7:
Bethesda, MD 20814		Bethesda, MD 20814	2
Name and street address	s of Florida registered agent: (P.O. Bo	ss. NOT accontable)	
	2 of Florida registered agent. (F.33, 110	ic <u>seed</u> acceptaine)	
water and sweet address			
Name:	C.T Corporation System		
Name:		33324 Florida	

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 Alfred Younan and accept the obligations of my position as registered agent.

By: CT Corporation System
(Registered agent's signature)

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: Marriott International, Inc.	□ Manager	Name:	
■Member	Address:	I Member	Address:	
□Authorized	7750 Wisconsin Avenue	☐ Authorized		
Person	Bethesda, MD 20814	Person		
Other	Other	_Other		□Other
				6
□Manager	Name:	□Manager	Name:	•.•
□Member	Address:	□Member	Address:	<u> </u>
□Authorized		[Authorized		
Person		Person		
DOther	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.817.155, F.S.

/s/ Andrew P.C. \	Signature of an authorized person	
Andrew P.C. Wrigh	u, Authorized Person	

Page: 5 of 5



Page 1

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

DELAWARE, DO HEREBY CERTIFY "COURTYARD MANAGEMENT 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 TWELFTH DAY OF JANUARY, A.D. 2023.

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

21 1 27 Fr 2:16



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SR# 20230116322

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

Setting W. Bullings, Secretary of Blain

Authentication: 202483360

Date: 01-12-23