

CAPITAL CONNECTION INC.
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302
(850) 224-8871 • (800) 442-8061 • Fax (850) 224-1222

M98000000524

000002536610--5
-05/27/98--01057--020
****346.00 ****346.00

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-05/27/98--01057--021
*****0.25 *****0.25

Port: St. Lucie Hotel Venture, LLC

Art of Inc. File _____
LTD Partnership File _____
Foreign Corp. File _____
☒ L.C. File cert. _____
Fictitious Name File _____
Trade/Service Mark _____
Merger File _____
Art. of Amend. File _____
RA Resignation _____
Dissolution / Withdrawal _____
☒ Annual Report / Reinstatement _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 MAY 27 PM 4:46

Cert. Copy _____

Photo Copy _____

Certificate of Good Standing _____

Certificate of Status _____

Certificate of Fictitious Name _____

Corp Record Search _____

Officer Search _____

Fictitious Search _____

Fictitious Owner Search _____

Vehicle Search _____

Driving Record _____

UCC Filing _____

UCC Search _____

SECRETARY OF STATE
DIVISION OF CORPORATIONS
FILED
UCC Retrieval _____

Courier _____

RECEIVED
98 MAY 27 AM 10:11
DIVISION OF CORPORATION

Please File
ASAP!

Thank Capital
D.

(5)

Signature _____

Requested by: Ces

Name _____

Walk-In _____

Date 5/27/98
Stat

Will Pick Up _____

Time 10:14

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. PORT ST. LUCIE HOTEL VENTURE, LLC
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)
2. Tennessee
(Jurisdiction under the law of which foreign limited liability company is organized)
3. APPLIED FOR
(FEI number, if applicable)
4. 3/10/98
(Date of Organization)
5. 2018
(Duration: Year limited liability company will cease to exist or "perpetual")
6. May 15, 1998
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 226 Tippah Street North
Grand Junction, Tennessee, 38039
(Street address of principal office)
8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

will cease to

SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAY 27 PM 4:47

TITLE:

TITLE:

CHARLES B. BLAND MGRM
123 East Market St.
Somerville, TN., 38068

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN
LIMITED LIABILITY COMPANY**

The undersigned member or authorized representative of a member of PORT ST. LUCIE HOTEL
VENTURE, LLC certifies:

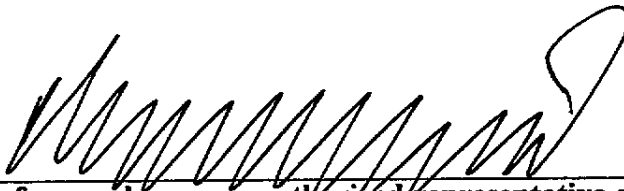
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1) the above named limited liability company has at least two members;

2) the total amount of cash contributed by the member(s) is \$ 120,000.00;

3) if any, the agreed value of property other than cash contributed by member(s) is \$ 0;
(A description of the property is attached and made a part hereto.)
and

4) the total amount of cash and property contributed and anticipated to be contributed
by member(s) is \$ 120,000.00;
(This total includes amounts from 2 and 3 above.)



Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this
affidavit constitutes an affirmation under the penalties of perjury that the facts
stated herein are true.)

CHARLES B. BLAND

Typed or printed name of signee

Filing Fee: \$250.00 for Application and Affidavit

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

PORT ST. LUCIE HOTEL VENTURE, LLC

2. The name and the Florida street address of the registered agent and office are:

CHARLES BLAND

(Name)

2601 WIDE LAKE BLVD.

Florida street address (P.O. Box NOT ACCEPTABLE)

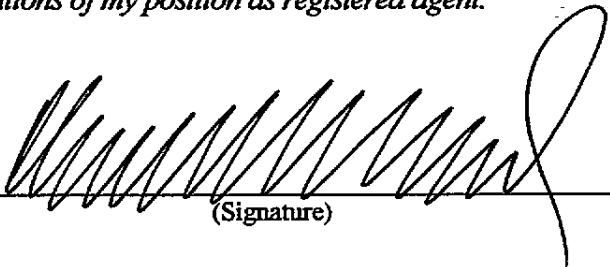
PENSACOLA

FL

32526

City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

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SECRETARY OF STATE
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98 MAY 27 PM 4:17

Secretary of State

Corporations Section

James K. Polk Building, Suite 1800
Nashville, Tennessee 37243-0306

ISSUANCE DATE: 05/21/1998
REQUEST NUMBER: 98141105
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 03/10/1998
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: 03/10/2018
CONTROL NUMBER: 0347124
JURISDICTION: TENNESSEE

TO:
RECORD-CHECK SERVICES, INC.
1556 W CRESTWOOD RD
MEMPHIS, TN 38119

REQUESTED BY:
RECORD-CHECK SERVICES, INC.
1556 W CRESTWOOD RD
MEMPHIS, TN 38119

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
"PORT ST. LUCIE HOTEL VENTURE, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF
FORMATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID;
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
MAY 27 PM 4:47

FOR: REQUEST FOR CERTIFICATE

ON DATE: 05/21/98

FROM:
TSIO (BOX 120598)
P. O. BOX 120598
NASHVILLE, TN 37212-0000

RECEIVED: FEES \$150.00 \$130.00
TOTAL PAYMENT RECEIVED: \$280.00

RECEIPT NUMBER: 00002315616
ACCOUNT NUMBER: 00000499



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE