

C T CORPORATION SYSTEM		
660 East Jefferson Stree	et	9000025588097 -06/12/38-01032004
Requestor's Name	Ì	~U6/12/38~~U1U32~-U04 *****35.00 *****35.00
<u>Tallahassee</u> , Florida 32	301	***************************************
Address (850) 222-1092	-	966669655000000000000000000000000000000
City State Zip	Phone	900025588097 -06/12/9801092005 ****250.00 ****250.00
CORPORA	TION(S) NAME	
Candle	and Orlando, FI-AI)	
() Profit () MonProfit () Limited Liability Con	() Amendment	98 JUN 12
(i) Foreign	() Dissolution/Wit	hdrawal () Mark 구 중위한
() Limited Partnership () Reinstatement	() Annual Report () Fict. Filing	() Other () Change of R.A. 2,
() Certified Copy	() Photo Copies	() CUS
() Call When Ready Walk In () Mail Out	() Call if Problem () Will Wait	() After 4:30 Pick Up
Name Availability Document	81491 J. A. 2020	Please Return Extra Copy(s) Filed Stamp
Examiner Updater	JUN 12 1890	Thanks, Melanie
Verifier Acknowledgment	124	PECEIVI 98 JUN 12 PM VISION OF CORPUI
W.P. Verifier	M98-1001,	RECEIVED 98 JUN 12 PH 1:24 VISION OF CORPURATION
CB3E034 (4.90)	γ	₩



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 12, 1998

CT CORPORATION

TALLAHASSEE, FL

SUBJECT: CANDLEWOOD ORLANDO, FL-ALTAMONTE SPRINGS, LLC

Ref. Number: W98000013606

We have received your document for CANDLEWOOD ORLANDO, FL-ALTAMONTE SPRINGS, LLC and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6917.

Gretchen Harvey Corporate Specialist Supervisor

Letter Number: 698A00033063

98 IIIN 12 PM 3: 47

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT 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. CANDLEWOOD ORLANDO, FL-ALTAMONTE S	SPRINGS, LLC					
(Name of foreign limited liability company mus		ıy" or their abbreviation				
"L.C." if not so contained in the name at present	t.)					
2.Delaware	3. 59-3498806					
(Jurisdiction under the law of which foreign line company is organized)	nited liability (FEI number, it	applicable)				
4 January 16, 1998	5 December 31, 2025					
(Date of Organization)	(Duration: Year limited liabil cease to exist or "perpetual")	(Duration: Year limited liability company will cease to exist or "perpetual")				
6 Upon qualification						
(Date first transacted business in	Florida. (See sections 608.501, 608.5	02 and 817.155, F.S.)				
7. 9342 East Central, Wichita, Kansa	25 67206					
7. 9342 East Central, Withita, Ransa	15 07200					
. (Str	eet 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 add	itional page if necessary)				
NAME & ADDRESS: TITLE	; NAME & ADDRESS:	TITLE:				
Candlewood Hotel Company, Inc. 1	Manager					
9342 East Central						
Wichita, KS 67206	<u></u>	— 98 91 SI				
		SECRETARY OF S VISION OF CORPOR				
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		RS				
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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 hotocopy is not acceptable. If the certificate is in a foreign

language, a translation of the certificate under oath of the translator must be submitted.)

(FL057 - 4/23/98)

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:		
	CANDLEWOOD ORLANDO, FL-ALTAMONTE SPRINGS, LLC		
2.	The name and the Florida street address of the registered agent and office are:		
	C T CORPORATION SYSTEM (Name)		
	1200 South Pine Island Road		
	Florida street address (P.O. Box NOT ACCEPTABLE)		
	Plantation FL 33324 (City/State/Zip)		
liabil agent relati	ng been named as registered agent and to accept service of process for the above stated lity company at the place designated in this certificate, I hereby accept the appointment of and agree to act in this capacity. I further agree to comply with the provisions of all sting to the proper and complete performance of my duties, and I am familiar with and acceptations of my position as registered agent.	as regi tatutes	sterea
0000			
C T	Corporation system (Signature) Connie Bryun, Special Asst. Sceretowy		

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The	e undersigned member or authorized representative of a member of CANDLEWOOD O	RLAN	DO,		
F	L-ALTAMONTE SPRINGS, LLC certifies:				
1)	the above named limited liability company has at least two members;				
2)	the total amount of cash contributed by the member(s) is	\$_		(€;
3)	if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.)	\$_		- (0_;
4)	the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$_		- ,	2_ .
	Umer E. Ru				
	Signature of a member or authorized representative of a member of 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.)		98 JUN 12	DIVISION OF CO	SECRETARY FILE
	Typed or printed name of signee		PM 3: 47)RPUKAHOM	OF STATE

Filing Fee: \$250.00 for Application and Affidavit

State of Delaware

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Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CANDLEWOOD ORLANDO, FL-ALTAMONTE
SPRINGS, 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 EIGHTH DAY OF
JUNE, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CANDLEWOOD ORLANDO, FL-ALTAMONTE SPRINGS, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JANUARY, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID IS THE EIGHTH DAY OF JUNE, A.D. 1998.

Edward J. Freel, Secretary of State

9126076

AUTHENTICATION:

06-08-98

981219987

2847681 8300

DATE: