m98000001465



ACCOUNT NO. 072100000032

REFERENCE :

045082

4380006

AUTHORIZATION :

\$ 285.00

ORDER DATE : November 25, 1998

ORDER TIME : 10:49 AM

ORDER NO. : 045082-160

CUSTOMER NO: 4380006

CUSTOMER: Melissa A. Durbin, Legal Asst

Host Marriott Corporation

10400 Fernwood Rd.

Bethesda, MD 20817

FOREIGN FILINGS

NAME:

HMC HOTEL DEVELOPMENT LLC

XXXX QUALIFICATION __(TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY . PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar

Name Availability Document Examiner **Updater** U dater Verifyer Acknowledgemen W. P. Verifyer

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. HMC Hotel Development LLC

De l	laware	3	DITURNER		
ompany	on under the law of which foreign limited li is organized)	iability	(FEI number, if applicable)	
1	November 10, 1998	.5, _	Perpetual		
	(Date of Organization)		(Duration: Year limited liability compar exist or "perpetual")	y will cease to	
upoi	qualification		<u>.</u>		
			tions 608.501, 608.502, and 817.155, F.S	S.)	1.
1040	00 Fernwood Road Bethesda, Ma	ryland 2	0817	·	_:
	(Street	address of p	rincipal office)		_
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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 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.)

State of Delaware Office of the Secretary of State

I. EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HMC HOTEL DEVELOPMENT 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 DECEMBER, A.D. 1998.

Edward J. Freel, Secretary of State

AUTHENTICATION:

9446646

981470237

8300

2965180

DATE:

12-08-98

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:
HMC Hotel Development LLC
2. The name and the Florida street address of the registered agent and office are:
The Prentice-Hall Corporation System, Inc (Name)
1201 Hays Street
Florida street address (P.O. Box NOT ACCEPTABLE)
Tallahassee FL 32301 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.

Couefl Dolo (Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of	
HMC Hotel Development LLCcertifies:	
1) the above named limited liability company has at least one member;	
2) the total amount of cash contributed by the member(s) is	s 160,00
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.)	<u>\$</u> :
and 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.)	s 100,00
Signature of a member or an authorized representative of a memory of a member of an authorized representative of a memory of the secution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	nber.
Christopher G. Townsend	
Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit