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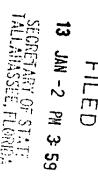
| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| |
| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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| 4212-61408 |
| -4010 |

Office Use Only



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VH

COVER LETTER

TO: Registration Section Division of Corporations

| SUBJECT: TRANS | HOTEL USA INC. | | | |
|-------------------------|--|--|---|--|
| | | esulting Florida Profit Corp | poration | |
| | | | and fees are submitted to convert an ordance with s. 607.1115, F.S. | |
| Please return all corre | espondence concerning | g this matter to: | | |
| GISELLE DEL AM | 0 | | | |
| | Contact Person | | | |
| INFANTE ZUMP | ANO | | | |
| | Firm/Company | | | |
| 500 S DIXIE HIGHV | VAY. SUITE 302 | | | |
| | Address | | | |
| CORAL GABLES, | FL 33146 | | | |
| | ity, State and Zip Code | | | |
| | LAMO@INFANTEZU | | | |
| For further information | on concerning this ma | tter, please call: | | |
| GISELLE DEL AMO | | _** \ | 2990 | |
| Name of Con | tact Person | Area Code and Dayti | me Telephone Number | |
| Enclosed is a check f | or the following amou | int: | | |
| ☑ \$105.00 Filing Fees | \$113.75 Filing Fees and Certificate of Status | ☐\$113.75 Filing Fees and Certified Copy | \$122.50 Filing Fees, Certified Copy, and Certificate of Status | |
| STREET ADDRESS | <u>S:</u> | MAILING A | | |
| Registration Section | | Registration Section | | |
| Division of Corporat | ions | Division of C | • | |
| Clifton Building | | P. O. Box 6327 | | |
| 2661 Executive Cent | | Tallahassee, | FL 32314 | |
| Tallahassee, FL 323 | O I | | | |



December 11, 2012

GISELLE DEL AMO INFANTE ZUMPANO 500 S DIXIE HIGHWAY, SUITE 302 CORAL GABLES, FL 33146

SUBJECT: TRANSHOTEL USA INC. Ref. Number: W12000061408

We have received your document for TRANSHOTEL USA INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete page 2.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 312A00029322

Division of Comparations DO DOV 6297 Tollahossos Florida 2021.

Certificate of Conversion For

"Other Business Entity" Into

Florida Profit Corporation

FILED

13 JAN -2 PN 3 59

SEGRETARY OF STATE TALLAHASSEE, FLORIDA

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

| Florida Statutes. |
|---|
| 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: |
| TRANSHOTEL USA INC. |
| Enter Name of Other Business Entity |
| 2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of NEW YORK |
| (Enter state, or if a non-U.S. entity, the name of the country) |
| on MAY 15, 2008 |
| Enter date "Other Business Entity" was first organized, formed or incorporated |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated: |
| N/A |
| 4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: |
| TRANSHOTEL USA INC. |
| Enter Name of Florida Profit Corporation |
| 5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.) |
| 6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion. |
| 7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is |

Page 1 of 2

currently organized, formed or incorporated.

13 JAN -2 PH 3: 59

| | | 9, 24 | | November | _ | | SECR | MART UNSTA |
|----------------|----------------|--|--|---------------------------------------|-------------------------|------------------|--------------|-------------------|
| Signe | d this _ | LL | _day of _ | POVEMBER | | , 20_ <u>[2.</u> | —I ALILA | HASSEE, FLOR |
| Reau | ired Si | gnature | for Flori | da Profit Corpora | tion: | | | |
| Indivi | dual si | gning af | firms that | the facts stated in t | his document a | re true. Any fi | alse inform | ation constitutes |
| a thir | l degre | e felony | as provide | ed for in s.817.155, | F.S. | | | |
| | _ | | \ | | | | na : | . 4 |
| Signa | ture of | Chairma | ın, Vice G | hairman Director. | Officer, or, if I | Directors or Of | llicers have | not been |
| select | ea, an I | ncorpor | ator: <u>/> </u> | de la Iglesia Title | Chief Executive | Officer | | |
| r i liite | u Hani | E, <u>Fanau</u> | oo i tanquo | Title. | GINE! EXCOUNT | <u> </u> | | |
| Requi | red Sig | znature(| s) on behu | <u>If of Other Busines</u> | <u>is Entity:</u> Indiv | idual(s) signin | ıg affirm(s) | that the facts |
| stated | in this | docume | nt are true | . Any false informa | ation constitute | s a third degre | e felony as | provided for in |
| s.817. | 155, F. | S. [Sed] | polow for r | equired signature(s) | J | | | |
| Kionat | uro: | y A | H) | | | | | |
| Printe | d Name | Amadeo | Franquet de | la Iglesia | Title: Chief E | xecutive Officer | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| Signat | ure: | | | | | | | |
| Printe | d Name | :: | | | Title: | | | |
| Sianoi? | nre. | | | | | | | • |
| Printe | d Name |): | | | Title: | | | |
| | | | | | | | | |
| Signat | ure: _ | | | | (E'.1) | <u> </u> | | |
| Printe | d Name | »: | | | I itle: | | | |
| Signat | ure: | | | | | | | |
| Printe | d Name | : | | | Title: | | | |
| | | | | | | | | |
| Signal | ure: d Nome | ······································ | | | Title | | | |
| 111116 | # 146011C | · | | | 11110 | ···· | | |
| | | | | or Limited Liabil | <u>ty Partnershir</u> | <u> 21</u> | | |
| Signat | ure of c | one Gene | eral Partner | • | | | | |
| ie Tia | dda I i | mitad Pa | tnamhin | or Limited Liabili | ty I imited Par | rtnorehin: | | |
| | | | neral Parti | | 17 E111111CO X 111 | the stript | | , |
| - | | | | | | | | |
| | | | ability Co | | | | | |
| Signat | ure of a | i Membe | r or Autho | rized Representative | | | | |
| <u>All otl</u> | | | | _ | | | | |
| oignat | nic oi s | ui aumor | ized persor | ii. | | | | |
| Fees: | | | | | | | | |
| | | | Conversio | | \$35.00 | | | |
| | | | | of Incorporation: | \$70.00 | | | |
| | | ied Cop | | | \$8.75 (Optio | | | |
| | Certii | ficate of | otatus: | | \$8.75 (Optio | ли) | | |
| | | | | | | | | |

Page 2 of 2

FILED

13 JAN -2 PN 3:59

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

SEGRETARY OF STATE

| ARTICLE I | NAME | HOTEL USA INC. |
|--|---|--|
| The name of the o | SEPORATION SHANS | HOTEL USA INC. |
| ARTICLE II | TIMINGERIA OF FIGUR | |
| 2000 0 | Principal <u>street</u> address ance De Leon Blvd., Sulte 600 | Mailing address, if different is: |
| | | |
| Coral Gat | oles, Florida 33134 | |
| ARTICLE III | PURPOSE | |
| | hich the corporation is organized is: | |
| This corporation | may engage in or transact any and all lawfi | ful activities or business permitted under the laws of the State of Florida. |
| A 12/20/20 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | CITA DEC | |
| <i>ARTICLE IV</i> The number of sha | SHARES | |
| | 200 | |
| Name and T | INITIAL OFFICERS AND/OR DIR itle: Amadeo Franquet do la Iglasia, Chief Executive Officer | Name and Title: |
| Address: | 2000 Ponco De Leon Blvd., Suito 600 | Address: |
| Auditos. | Corel Gabbes, Florida 33134 | Audiws. |
| | | |
| Name and T | it]e: Julio de la Cruz Nieto, Director | Name and Title: |
| Address: | 2000 Ponce De Leon Blvd., Suite 600 | Address: |
| | Coral Gables, Florida 33134 | |
| 3.1 Lm | | |
| | it C; Luis Lapez Ziegler, Director 2000 Ponce De Leon Blvd., Suite 600 | Name and Title: |
| Address: | Coral Gables, Floride 33134 | Address: |
| | P | |
| ARTICLE VI | REGISTERED AGENT | |
| | orida street address (P.O. Box NOT acce | ptable) of the registered agent is: |
| Name: | IZHM SERVICES, INC. | |
| Address: | 500 S. DIXIE HIGHWAY, SUITE 302 | <u></u> |
| | CORAL GABLES, FL 33146 | |
| RTICLE VII | <u>INCORPORATOR</u> | |
| | dress of the Incorporator is: | • |
| Name: | GISELLE DEL AMO, ESQ. | |
| Address: | 600 S. DIXIE HIGHWAY, SUITE 302 | |
| | CORAL GABLES, FL 33146 | _ |
| laving been name | ed as registered agent to accept service o | of process for the above stated corporation at the place designated in |
| | | ent as registered agent and agree to act in this capacity |
| and the second | | 1 / |
| tan | 5 9 | 12 3 12 |
| Requ | ired Signature/Registered Agent | Date |
| submit this down | men and affirm that the facts stated he | erein are true. I am aware that any false information submitted in a |
| locument to the D | enarment of State constitutes a third dear | ree felony as provided for in s.817.155, F.S. |
| | | |
| × | | Date Date |
| Requir | ed Signature/Incorporator | Date |