

P176000064240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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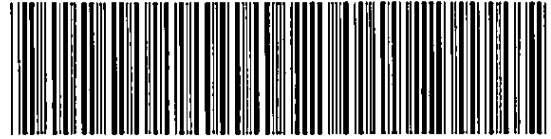
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DIVISION OF CORPORATIONS  
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**COVER LETTER**

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Department of State  
New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** Southern Host Lodging Inc.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Brandon LaBorde  
\_\_\_\_\_  
Name (Printed or typed)  
  
200 Carondelet Street  
\_\_\_\_\_  
Address  
  
New Orleans Louisiana 70130  
\_\_\_\_\_  
City, State & Zip  
  
501-651-0922  
\_\_\_\_\_  
Daytime Telephone number  
  
brad@hosthotelgroup.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**

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CHECK.

**ARTICLES OF INCORPORATION**

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

**ARTICLE I NAME**

The name of the corporation shall be: Southern Host Lodging Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2900 North Monroe Street  
Tallahassee Florida 32303

Mailing address, if different is:  
501 Tchoupitoulas Street  
New Orleans Louisiana 70130

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Hotel Management and Property Trust, and to conduct legal and lawful real estate management in the state of Florida under the laws of the state of Florida and the United States.

**ARTICLE IV SHARES**

The number of shares of stock is: 5000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Brad M Juneau President

Address: 930 Poydras Street  
New Orleans Louisiana 70112

Name and Title: Brandon M LaBorde Vice President

Address: 200 Carondelet Street  
New Orleans 70130

Name and Title: Brandon M LaBorde Secertary

Address: 200 Carondelet Street  
New Orleans 70130

Name and Title: Rodolfo Molina Operations Director

Address: 908 Bourbon Street  
New Orleans 70130

Name and Title:

Address:

Name and Title:

Address:

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 JUL 30 AM 3 01

**FILING CANCELLED  
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CHECK.**

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_  
Address \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Attorney Ronald Olsen  
Address: 1020 Hwy 98 East  
Destin Florida 32541

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Brad Juneau  
Address: 930 Poydras Street  
New Orleans 70112

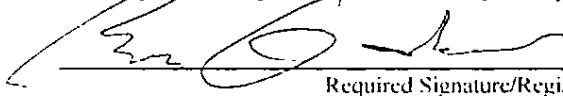
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: July 30th 2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

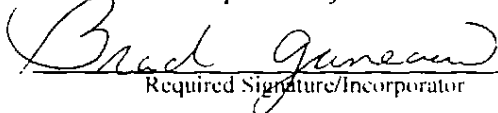
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature/Registered Agent

July 30 2017  
\_\_\_\_\_  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the 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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

July 30th 2017  
\_\_\_\_\_  
Date