

P26284

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer.

Ratanne from CSC.  
says Minnesota does  
not issue a Certificate  
reflecting name changes

cf 10/12/17

Office Use Only

641-



900304031599

FILED

2017 OCT -6 AM 9:36

FILED

2017 OCT -6 AM 10:52

C. GOLDEN

OCT 13 2017

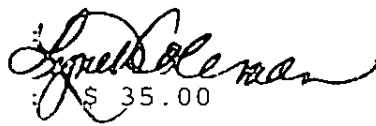
CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 846467 8119901

AUTHORIZATION

COST LIMIT : \$ 35.00



ORDER DATE : October 3, 2017

ORDER TIME : 9:29 AM

ORDER NO. : 846467-025

CUSTOMER NO: 8119901

FOREIGN FILINGS

NAME: COUNTRY INNS & SUITES BY  
CARLSON, INC.

XXX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XXX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Country Inns & Suites By Carlson, Inc.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** P26284

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Julie Sheahan

\_\_\_\_\_  
Name of Contact Person

Carlson Rezidor Hotel Group

\_\_\_\_\_  
Firm/Company

701 Carlson Parkway, Suite 200, MS 8256

\_\_\_\_\_  
Address

Minnetonka, MN 55305

\_\_\_\_\_  
City/State and Zip Code

jsheahan@carlsonrezidor.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julie Sheahan

at ( 763 ) 212-0489

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$35.00 Filing Fee

☐

\$43.75 Filing Fee &  
Certificate of Status

☐

\$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐

\$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy  
(Additional copy is  
enclosed)

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 11, 2017

CORPORATION SERVICE COMPANY

SUBJECT: COUNTRY INNS & SUITES BY CARLSON, INC.  
Ref. Number: P26284

**RESUBMIT**  
Please give original  
submission date as file date.

17 OCT 12 PM 4:30

We have received your document for COUNTRY INNS & SUITES BY CARLSON, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

You failed to make the correction(s) requested in our previous letter.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please list the date the changed was made on number 4.

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) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 717A00020563



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 9, 2017

CORPORATION SERVICE COMPANY

**RESUBMIT**  
Please give original  
submission date as file date.

SUBJECT: COUNTRY INNS & SUITES BY CARLSON, INC.  
Ref. Number: P26284

We have received your document for COUNTRY INNS & SUITES BY CARLSON, INC. and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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) 245-6050.

Claretha Golden  
Regulatory Specialist II

Letter Number: 817A00020284

RECEIVED  
OCT 10 2017  
11:48 AM

(Pursuant to s. 607.1504, F.S.)

**(1-3 MUST BE COMPLETED)**

(Document number of corporation (if known))

(Name of corporation as it appears on the records of the Department of State)

(Incorporated under laws of)

(Date authorized to do business in Florida)

**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

its jurisdiction of incorporation? 9/29/2017

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

(New duration)

(New jurisdiction)

70 days prior to delivery of the application to the Department of State, by the Secretary of State or having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

(Typed or printed name of person signing)

(Title of person signing)

## Office of the Minnesota Secretary of State Certification of Record

I, Steve Simon, Secretary of State of Minnesota, do certify that: The filing(s) listed below were filed in the Minnesota computerized/central filing system on the date(s) listed below and that the copies associated with this certification are a true and complete copy of those filings as filed in that system.

Filing(s) filed on:

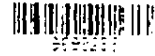
<u>Filing Date</u>	<u>Filing Type</u>	<u>Filing Number</u>
09/29/2017	Amendment - Business Corporation (Domestic)	969828600048

This certificate has been issued on: 10/10/2017



*Steve Simon*

Steve Simon  
Secretary of State  
State of Minnesota



# Office of the Minnesota Secretary of State

## Minnesota Business & Nonprofit Corporations

### Amendment to Articles of Incorporation

Minnesota Statutes, Chapter 302A or 317A



Read the instructions before completing this form.

Filing Fee: \$55 for expedited service in-person and online filings, \$35 for mail

1. Corporate Name: (Required)

Country Inns & Suites By Carlson, Inc.

List the name of the company prior to any desired name change

2. This amendment is effective on the day it is filed with the Secretary of State, unless you indicate another date, no later than 30 days after filing with the Secretary of State.

09/29/2017

Format: (mm/dd/yyyy)

3. The following amendment(s) to articles regulating the above corporation were adopted: (insert full text of newly amended article(s) indicating which article(s) is (are) being amended or added.) If the full text of the amendment will not fit in the space provided, attach additional pages.

#### ARTICLE 1

The name of this corporation shall be Country Inn & Suites by Radisson, Inc.

4. This amendment has been approved pursuant to Minnesota Statutes, Chapter 302A or 317A.

5. I, the undersigned, certify that I am signing this document as the person whose signature is required, or as agent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in compliance with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the penalties of perjury as set forth in Section 609.48 as if I had signed this document under oath.

Signature of Authorized Person or Authorized Agent

Date

9/29/2017

Email Address for Official Notices

Enter an email address to which the Secretary of State can forward official notices required by law and other notices:

jgarner@carlsonrezidor.com

☒ Check here to have your email address excluded from requests for bulk data, to the extent allowed by Minnesota law.

List a name and daytime phone number of a person who can be contacted about this form:

Julie Sheahan

(763)212-0489

Contact Name

Phone Number

Entities that own, lease, or have any financial interest in agricultural land or land capable of being farmed must register with the MN Dept. of Agriculture's Corporate Farm Program.

Does this entity own, lease, or have any financial interest in agricultural land or land capable of being farmed?

Yes ☐ No ☒





Work Item 969828600048  
Original File Number 5H-576

STATE OF MINNESOTA  
OFFICE OF THE SECRETARY OF STATE  
FILED  
09/29/2017 11:59 PM

A handwritten signature in black ink that reads "Steve Simon". The signature is written in a cursive, flowing style.

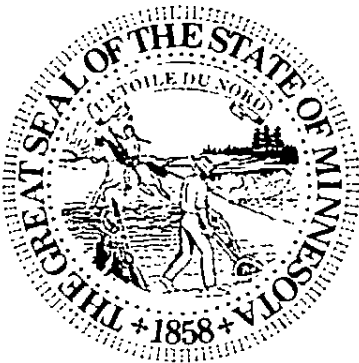
Steve Simon  
Secretary of State

**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:	Country Inn & Suites by Radisson, Inc.
Date Filed:	07/22/1986
File Number:	5H-576
Minnesota Statutes, Chapter:	302A
Home Jurisdiction:	Minnesota

This certificate has been issued on: 10/04/2017



A handwritten signature in cursive script that reads "Steve Simon".

Steve Simon  
Secretary of State  
State of Minnesota