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CORPORATION OUTFITS CORPORATION SERVICE FOR ATTORNEYS STOCK AND BOND CERTIFICATES MINUTE BOOKS, SEAL

M. BURR KEIM COMPANY

2021 ARCH STREET  
PHILADELPHIA, PA 19103-1491  
(215) 563-8113  
(FAX) (215) 977-9386  
1-800-533-8113

November 25, 1998

VIA UPS NEXT DAY AIR

EXPEDITED SERVICES  
Office of the Secretary of State  
409 East Gaines Street  
Tallahassee, FL 32301

RE: SABER HOSPITALITY MANAGEMENT, INC.

600002698426-4  
-12/01/98-01018-006  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

Ladies/Gentlemen:

Enclosed is an Application by Foreign Corporation for Authorization to Transact Business in Florida, a Good Standing Certificate and our check in the amount of \$78.75 to cover the filing fee for the above corporation.

Please expedite the filing and return the Certificate of Status to us as soon as possible.

Very truly yours,

M. BURR KEIM COMPANY

*Robert Worthington Jr.*  
Robert Worthington

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
98 DEC - 1 AM 10: 08

*mtc*

12/1

RW:s1  
Enclosure

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. SABER HOSPITALITY MANAGEMENT, INC.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware 3. 52-2130308  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. November 10, 1998 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Pending  
(Date first transacted business in Florida. (SEE SECTIONS 607.1501, 607.1502, and 817.155, F.S.)

7. 101 West Main Street, Moorestown, New Jersey 08057  
(Current mailing address)

8. Hotel Property Consultation  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  
Name: Kenneth Kochenour  
Office Address: 151 East Washington Street  
Orlando, Florida, 32801  
(Zip code)

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**10. Registered agent acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 day prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_ SEE ATTACHED \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_ SEE ATTACHED \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_


Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  \_\_\_\_\_  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. KENNETH KOCHENOUR, PRESIDENT \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

# SABER HOSPITALITY MANAGEMENT, INC.

NAME	TITLE	ADDRESS
<u>Officers:</u>		
Kenneth Kochenour	President & CEO	101 West Main Street Moorestown, NJ 08057
Barbara Evans	V.P. & Secretary	101 West Main Street Moorestown, NJ 08057
Robert Keith	V.P. & Treasurer	101 West Main Street Moorestown, NJ 08057
Andrew Tod	V.P. & Asst. Secretary	101 West Main Street Moorestown, NJ 08057
<u>Directors</u>		
Ira Lubert	Chairman of the Board	101 West Main Street Moorestown, NJ 08057
Kenneth Kochenour	Director	101 West Main Street Moorestown, NJ 08057
Barbara Evans	Director	101 West Main Street Moorestown, NJ 08057

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DIVISION OF CORPORATIONS

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*State of Delaware*  
*Office of the Secretary of State*

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SABER HOSPITALITY MANAGEMENT, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF NOVEMBER, A.D. 1998.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SABER HOSPITALITY MANAGEMENT, INC." WAS INCORPORATED ON THE TENTH DAY OF NOVEMBER, A.D. 1998.

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE AFFAIRS  
98 DEC - 1 AM 10: 08



*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION: 9422576  
DATE: 11-24-98