State of Idaho

Office of the Secretary of State

CERTIFICATE OF REGISTRATION

OF

POLE LINE TWIN FALLS HOTEL, LLC

File Number W 195710

I, LAWERENCE DENNEY, Secretary of State of the State of Idaho, hereby certify that an application for Foreign Registration Statement, duly executed pursuant to the provisions of the Idaho Uniform Business Organization Code, has been received in this office and is found to conform to law.

ACCORDINGLY and by virtue of the authority vested in me by law, I issue this Certificate of Registration to transact business in this State and attach hereto a duplicate of the application for such certificate.

Dated: February 9, 2018



SECRETARY OF STATE

By Blatty



FOREIGN REGISTRATION STATEMENT

Title 30, Chapter 21, Idaho Code

Filing fee: \$100 typed, \$120 not typed

Complete and submit the form in duplicate.

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SECRÉTARY CHARAGE STATE OF IDAHO

	To the second of the Pole Line Twin Falls Hotel LLC						
1.	. The name of the entity is: Pole Line Twin Falls Hotel, LLC						
2.	The name which it shall use in Idaho is:						
3. Select the type of entity you wish to register: (Enter a name here, only if you are required to adopt an alternato name)					if you are required to adopt an afternate name)		
	☐ Business Corporation	☐ General Partnership					
	☐ Nonprofit Corporation	☐ General Cooperative Association					
	☐ Limited Liability Partnership	rtnership					
	☑ Limited Liability Company ☐ Statutory Trust, Business Trust, or Common-law Business Trust						
	Other: (Use "Other" only if your foreign entity type is not listed above, and enter the type here.)						
	(Use "Other" only if your fore	ign entity type is no	t listed above, and e	nter the	type here.)		
4.	Jurisdiction of formation: DE	(Provide	the domestic jurisdic	tion wh	ere the entity was formed)		
5.	The address of its principal office is:						
	1095 W. Rio Salado Parkway Suite 206 Tempe, AZ 85281						
	(Street Address)						
	(Mailing Address, if different)	(Mailing Address, if different)					
6.	The address of its domestic princi	he address of its domestic principal office (if required by the laws of the jurisdiction of formation) is:					
	(Street Address)						
	(Mailing Address, if different)						
7.	The mailing address to which correspondence should be addressed, if different from item 5, is:						
	, and the second	•		•	· · · · · · · · · · · · · · · · · · ·		
	(Address)						
8.	lame and street address of registered agent <u>in Idaho</u> :						
	CT Corporation System 921 S. Orchard St. Suite G Boise, ID 83705						
	(Name) (Address)						
9.	he name, capacity, and mailing address of at least one governor:						
	Hotel Upstream, LLC Manager 1095 W. Rio Salado Parkway Suite 206 Tempe, AZ 85281						
	(Name)	(Capacity)	(Address)				
	(Name)	(Capacity)	(Address)				
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				宣	IDAHO SECRETARY OF STATE		
	Typed Name: Jason Kotter			Se l	02/09/2018 05:00		
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	Signature:			135	10 100.00 = 100.00 FOR REG ST #2		
	Signature.			ary	10 20.00 = 20.00 EXPEDITE C #3		
	Capacity: Manager			Secretary of State use only	_		
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Rev. 08/2015				-	W195710		
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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "POLE LINE TWIN FALLS HOTEL, 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 FIRST DAY OF FEBRUARY, A.D. 2018.

Authentication: 202080302

Date: 02-01-18

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