State of Rhode Island
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Certificate Request Form

Request Information

ID	ENTITY NAME	CERTIFICATE TYPE
001705047	BSREP II WS HOTEL TRS SUB LLC	Certificate of Good Standing

Filer's Contact Information
(Enter a contact name, mailing address and email.)

Contact Name: Steven Friedman
Business Name:
No. and Street: 3023 Avenue J
City or Town: Brooklyn State: NY Zip: 11210 Country: USA
Contact Phone: 718-705-9886 ext:
Contact Email: mmajadas@platinumfilings.com