May 29 2007 14 00003158 Division of Co.

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name

: NATIONAL REGISTERED AGENTS, INC.

Account Number : I2003C000062

: (609)716-0300

Fax Number

: (609)716-0820

ORIDA/FOREIGN LIMITED LIABILITY CO.

Leisure Resorts, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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(H070001437773)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. Leisure Resorts . IJC
(Name of Foreign Limited Liability Company)
2. Delewere (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. May 24, 2007 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A Cota firm) to received business in Florida if erior to registration
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. c/o Chase Enterprises, Goodwin Square, 225 Asylum Street, 29th Floor, 77
Hartford, Connecticut 06103-1538
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Cheryl A. Chase, a Manager, c/o Chase Enterprises, 225 Asylum Street, 29th Fl
Hartford, CT 06103-1538; Arnold L. Chase, a Manager, c/o Chase Enterwises,
225 Asylum Street, 29th Fl, Hartford, CF 06103-1538
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: any lawful purpose
pursuant to Title XXXI, Chapter 608, Florida Statutes
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penaltics of perjury that the facts stated herein are true.) Cheryl A. Chase, a Manager Typed or printed name of signee

(HO70001437713)

(HO 7000 1437773)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

NOTE LLC	y Company is:	
JR15, LLC		
nd the Florida street a	address of the registered agent and offic	e are:
		TS O
· NRAI Services, Inc.		
111011 0011100111	(Name)	
		表示 20 日
2731 Executive Park	Drive, Bulta 4	SE SE
Florida Si	treet Address (P.O. Box NOT ACCEPTABLE)	
	•	8: FLC
Weston	ਜ਼ਾ 33331	유고 📜
, ,		——— ēm 2
ny at the place designo e to act in this capacity proper and complete p	ated in this certificate, I hereby accept the y. I further agree to comply with the pro- performance of my duties, and I am famili	e appointment as registered visions of all statutes iar with and accept the
	NRAI Services, Inc. 2731 Executive Part Florida S Weston med as registered again at the place designed to act in this capacity position as register any position as register	NRAI Services, Inc. (Name) 2731 Executive Park Drive, Sulta 4 Florida Street Address (P.O. Box NOT ACCEPTABLE) Weston FL 33331 City/State/Zip med as registered agent and to accept service of process for the place designated in this certificate, I hereby accept the eto act in this capacity. I further agree to comply with the promoper and complete performance of my duties, and I am familiary position as registered agent as provided for in Chapter 608,

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

(HO70001437773)

(Ho70001431713) Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LEISURE RESORTS, ILC" 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 TWENTY-PIFTH DAY OF MAY, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LEISURE RESORTS, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF MAY, A.D. 2007.

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

070619844

AUTHENTICATION: 5706354

DATE: 05-25-07

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