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COVER LETTER

-	stration Section	
SUBJECT:	Tzell Holdings, LLC Name of Limited Liability Company	
	Name of Limited Liability Company	
	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Cert I check are submitted to register the above referenced foreign limited liability company to transact business in	n Florida
Please return al	all correspondence concerning this matter to the following:	
	Tudy Hasse Name of Person	Harries.
	Name of Person Travel Leaders Group, LLC Firm/Company 3033 Campus Drive, Swite W320 Address	O
	Firm/Company	>
	3033 Campus Drive, Swite W320	
	Address	
	Plymouth, mw 55441 City/State and Zip Code	
	City/State and Zip Code	
	jhasse atravelleaders, com	
	E-mail address: (to be used for future annual report notification)	
For further info	ormation concerning this matter, please call:	
	Tudy Hasse at (763) 744-3735 Name of Person Area Code & Daytime Telephone Number	
	Name of Person Area Code & Daytime Telephone Number	
Divisio	LING ADDRESS: STREET ADDRESS: bion of Corporations birration Section Registration Section	
P.O. B	Box 6327 Clifton Building	
Tallah	hassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a	a check for the following amount:	
	25.00 Filing Fee \$\Bigcup \$130.00 Filing Fee & \Bigcup \$155.00 Filing Fee & \Bigcup \$160.00 Filing Fee, Certified Copy of Status & Certified Copy	
•	er en	

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. Tzell Holdings LLC (Name of Foreign Limited Liability Company; must include Limited Liability Company," "L.L.C.," or "L.L.C."
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Delaware (Jurisdiction under the law of which foreign limited liability) 3. 27-317 3024 (FEI number, if applicable)
company is organized)
4. 8/3/2010 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 3033 Campus Drive, Suite W320
7. 3033 Campus Drive, Stude W320 Plymouth, mN 5544-1 (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:
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.) Regionation required For Soller of Travel Livense For Protravel 11. Nature of business or purposes to be conducted or promoted in Florida: <u>outher of Protravel</u> 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 penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Robert 5. Brill Typed or printed name of signee

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.

1. The name of the Limited Liability Company is: 1. The name of the Limited Liability Company is: 1. The name of the Limited Liability Company is:	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Cooppration Service Company	
1201 Hays Street Florida Street Address (P.O. BOX NOT ACCEPTABLE)	
Talahassee FL 32301	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "TZELL HOLDINGS, 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 SEVENTH DAY OF MAY, A.D. 2013.

4855253 8300

130538629

AUTHENTY CATION: 0414528

DATE: 05-07-13

You may verify this certificate online at corp.delaware.gov/authver.shtml