# Recreation USA Inc. PMB 1899 Atio W Nine Mile RD Pensacola, FL 32534 USA... City/State/Zip Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) 700003430067 -10/19/00--01081--007 (Document #) (Corporation Name) W-25493 (Document #) (Corporation Name) ☐ Certified Copy Pick up time ☐ Walk in Certificate of Status ☐ Photocopy Mail out Will wait **AMENDMENTS NEW FILINGS** Amendment Profit Resignation of R.A., Officer/Direct Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATI OTHER FILINGS Annual Report Limited Partnership Fictitious Name Reinstatement Trademark Other

**Examiner's Initials** 

### TRANSMITTAL LETTER

	ion/Tax Lien Section f Corporations					
SUBJECT:	RECREATION USA	INC.				
SOBJECT.	(Name of corporation	- must include suffix)				
Dear Sir or Madan	<b>n:</b>					
The enclosed "App" "Certificate of Exit to transact business	istence", and check are submitted to re	Authorization to Transact Business in Florida", gister the above referenced foreign corporation				
Please return all co	orrespondence concerning this matter	to the following:				
	Richard C. (Name of	<b></b>				
	(Name of	Person)				
	RECREATION	USA INC				
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	410 West 9 1	A. 1= R1 PMB 1899				
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	(Chy/Stat	SS 1 F	-			
Should you need	to call someone concerning this matter	r, please call:	1 )			
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DICKORJU	de Robett at (407 f Person) (Area (	) 396 96ad Sm =				
(Name of	f Person) (Area C	Code & Daytime Telephone Number)				
STREET ADDR	ESS:	MAILING ADDRESS:				
Qualification/Tax	Lien Section	Qualification/Tax Lien Section				
Division of Corpo	orations	Division of Corporations P.O. Box 6327				
409 E. Gaines St. Tallahassee, FL		Tallahassee, FL 32314				
•	ck for the following amount:					
<b>570.00</b> Filing	Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy				

### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 23, 2000

RECREATIONA USA INC PMB 1899 410 W NINE MILE RD PENSACOLA, FL 32534

SUBJECT: RECREATION USA INC Ref. Number: W00000025493

We have received your document for RECREATION USA INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 000A000552

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO 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. RECREATION USA 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. Mississippi 3. 59-3664425 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4
6. UPON QUALIFICATION
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 410 WEST 9 MILE AND 1899
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PENSACOLA FI 32534
(Current mailing address)
8. NATION WIDE CAMPING Club System  (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)
Name: Richard C Riblett #14
Office Address: 725 So Old LAKE W. LOW PU
KISSIMMEE, Florida, 34747 (Zip code)
10. Registered agent's 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 obligations of my position as registered agent.
(Registered agent's signature)
11. Attached is a certificate of existence duly authenticated, not more than 90 days 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

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

which it is incorporated.

Chairman:			+ <u> </u>	<u> </u>	
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Vice Chairman:					
Address:					
	200 7				
Director:				•	
Address:					
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Director:					•
Address:					:
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B. OFFICERS (Street addres	is only - P.O. Box NOT accept	table)			± . 2
President: Richard	6 BIPLEH #14	· · · · · · · · · · · · · · · · · · ·	<del></del>	<u> </u>	
Address: <u>725 So</u>	Old LAKE Wil	LA 602	<u></u>	- : # <u># :</u>	±,π
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Vice President:			CR.	<del>- 1</del>	
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Teasurer:  Address:  OPE: If necessary, you may atta	ch as addendum to the application	listing additional office	rs and/or directors.	<u> </u>	
Address:  NOTE: If necessary, you may acta  3.		listing additional office	rs and/or directors.	<u> </u>	Ter was the

# State of Mississippi

## Secretary of State's Office Eric Clark

Secretary of State Jackson, Mississippi

CERTIFICATE OF EXISTENCE/AUTHORITY

I, ERIC CLARK, Secretary of State of the State of Mississippi, and as such, the legal custodian of the corporate records, required by the laws of Mississippi, to be filed in my office, do hereby certify:

That on December 20,1999 the state of Mississippi issued a Charter/Certificate of Authority to:

RECREATION USA INC.

That the state of incorporation is MISSISSIPPI.

That the period of duration is Perpetual.

That according to the records of this office, Articles of Dissolution or a Certificate of Withdrawal have not been filed.

That according to the records of this office, a current Annual Report has been delivered to the Office of the Secretary of State

I further certify that all fees, taxes and penalties owed to this state, as reflected in the records of the Secretary of State, have been paid and that the corporation is in existence or has authority to transact business in Mississippi.

STATE OF MISS

Given under my hand and seal of office August 14,2000

Tric Clark

ERIC CLARK, Secretary of State