

CT CORPORATION

**F02000000283**

CORPORATION(S) NAME

Storied Places, Inc.

0

FILED  
02 JAN 17 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
02 JAN 17 AM 11:30  
DIVISION OF CORPORATION

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Profit   | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit           |   |   |
| <input checked="" type="checkbox"/> Foreign  | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|  | <input type="checkbox"/> Reinstatement          |   |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
|  | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out            |   |   |

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
Document \_\_\_\_\_  
Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

1/17/02

Order#: 5034795

000004781920--6

-01/17/02--01045--008  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

**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*

FILED  
NOV 17 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. STORIED PLACES, 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. DELAWARE 3. 84-1609903  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/20/2001 5. PERPETUAL  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON FILING  
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 14646 NO. Kierland Blvd., Suite 210, Scottsdale, AZ 85254 Attn: J. Onken  
(Current mailing address)
8. RESORT REAL ESTATE  
(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: C T Corporation System
- Office Address: 1200 South Pine Island Road
- Plantation, Florida, 33324  
(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.*

C T Corporation System

Hiedi M. Liesch - Spec. Asst. Sect.  
(Registered agent's signature) Hiedi M. Liesch

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 which it is incorporated.

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

FILED  
JAN 17 PM 2:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**A. DIRECTORS (Street address only - P.O. Box NOT acceptable)**

Chairman: SEE ATTACHED

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS (Street address only - P.O. Box NOT acceptable)**

President: SEE ATTACHED

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. \_\_\_\_\_

DAVID D. KLEINKOPF, ASSISTANT SECRETARY

(Typed or printed name and capacity of person signing application)

**CURRENT DIRECTORS AND OFFICERS OF STORIED PLACES, INC.**

**DIRECTORS**

**ADDRESS**

Director	Gary L. Raymond	#329-2055 Lake Placid Road Whistler, BC CANADA V0N 1B2
Director	Jeff J. Stipek	14646 No. Kierland Boulevard Suite 210 Scottsdale, Arizona 85254
Director	James E. Onken	14646 No. Kierland Boulevard Suite 210 Scottsdale, Arizona 85254

**OFFICERS**

**OFFICE**

**NAME**

**ADDRESS**

President	Gary L. Raymond	#329-2055 Lake Placid Road Whistler, BC CANADA V0N 1B2
Vice Pres	John E. Currie	200 Burrard Street, Suite 800 Vancouver, BC CANADA V6C 3L6
Vice Pres	Jeff J. Stipek	14646 No. Kierland Boulevard Suite 210 Scottsdale, Arizona 85254
Vice Pres	James E. Onken	14646 No. Kierland Boulevard Suite 210 Scottsdale, Arizona 85254
Vice Pres	Michael F. Coyle	200 Burrard Street, Suite 800 Vancouver, BC CANADA V6C 3L6
Corp. Secy	Ross J. Meacher	200 Burrard Street, Suite 800 Vancouver, BC CANADA V6C 3L6
Asst. Secy	David D. Kleinkopf	1050 17 <sup>th</sup> Street, Suite 1500 Denver, Colorado 80265

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 JAN 17 PM 2:02

FILED

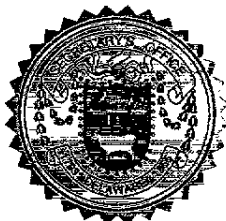
# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STORIED PLACES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF JANUARY, A.D. 2002.

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



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3459164 8300

AUTHENTICATION: 1544453

020010191

DATE: 01-07-02

FILED  
JAN 17 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA