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| Certified Copies | Certificates | of Status | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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| | ACCOUNT NO. : 072100000032 |
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| | REFERENCE : 131071 7155210 |
| | AUTHORIZATION: Totucia liquis |
| | COST LIMIT : \$ 1220.00 |
| | |
| ORDER DATE | : June 13, 2003 |
| ORDER TIME | : 10:45 AM |
| ORDER NO. | : 131071-005 |
| CUSTOMER NO | : 7155110 |
| | Ms. Ann Reid Cendant Corporation 1 Campus Drive |
| | Parsippany, NJ 07054 |
| ИАМЕ | FOREIGN FILINGS RCI HOLDIAY NETWORK, INC. |
| XXXX QUALI | FICATION (TYPE: <u>CO</u>) |
| PLEASE RETU | RN THE FOLLOWING AS PROOF OF FILING: |
| XX PLA | TIFIED COPY IN STAMPED COPY TIFICATE OF GOOD STANDING |
| CONTACT PER | SON: SUSIE KNIGHT EXT# 1156 |
| | EXAMINER: |
| | |

`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. RCI Holiday Network Inc. | <u> </u> |
|---|--|
| (Name of corporation; must include the word "INCORPOR words or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name | early indicate that it is a corporation instead of a |
| 2. Delaware | 3. 57-1147453 |
| (State or country under the law of which it is incorporated) | (FEI number, if applicable) |
| 4. 11/6/2002 | 5. Perpetual |
| (Date of incorporation) | (Duration: Year corp. will cease to exist or "perpetual") |
| 6. 9/13/2002 | not transacted business in Florida, insert "upon qualification.") |
| | 501, 607.1502 and 817.155, F.S.) 7054 address) |
| 8. Making reservations for and selling tra- (Purpose(s) of corporation authorized in home state o 9. Name and street address of Florida registered agen | r country to be carried out in state of Florida) |
| Name: <u>Corporation Service Company</u> | |
| Office Address: 1201 Hays Street | |
| Tallahassee | , Florida <u>32301</u> |
| (City) | (Zip code) |
| designated in this application, I hereby accept the appo | ervice of process for the above stated corporation at the place intment as registered agent and agree to act in this capacity. I les relative to the proper and complete performance of my as of my position as registered agent. |

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.

(Registered agent's signature)

RCI HOLIDAY NETWORK, INC.

Name

Biase, Lisa A.
Bock, Eric J.
Borger, John E.
Buckman, James E.
Cocroft, Duncan H.
Feldman, Lynn A.
Giamalva, Peter
Hertweck, John
Holmes, Stephen P.
Huber, Joseph
Janofsky, Arnold
Johnson, Mark E.
May, Kenneth N.
McClain, John T.
Meisner, Richard S.
Peterson, John M.
Sera, Jean Marie
Steeneck, Craig D.
Ventura, Vincent
Wyshner, David B.

Title

Assistant Secretary
Executive Vice President and Assistant Secretary
Executive Vice President and Assistant Secretary
Director and Executive Vice President
Executive Vice President and Treasurer
Vice President and Assistant Secretary
Director and Chairman
Vice President, Tax
Assistant Secretary
Assistant Treasurer
Chief Executive Officer
Senior Vice President
Vice President and Assistant Secretary
Assistant Treasurer
Assistant Treasurer
Assistant Secretary
Executive Vice President and Chief Financial
Senior Vice President, Tax
Executive Vice President

The Addresses for the above is: 7 Sylvan Way, Parsippany, NJ 07054

12. Names and business addresses of officers and/or directors:

| A. DIRECTORS | | | · - | • | |
|---|---------------|---|---------------------|--|--|
| Chairman: See attached officers/direc | tors ride | <u>r, , , , , , , , , , , , , , , , , , , </u> | <u> </u> | | |
| Address: | | | , '+ ' ' | - <u> </u> | <u></u> |
| | | | | | 9. |
| Vice Chairman: | | | | 工门 | <u>u</u> T |
| · | | | | | |
| Address: | | | | | - 0 M |
| | | | | 7. | -1 |
| Director: | | | | 7 | |
| Address: | | <u></u> | - | | P. 0 |
| | | | _ === | ·- <u></u> | <u>,</u> |
| Director: | | | | | 5.44 |
| Address: | | | | | |
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| | | | | | |
| B. OFFICERS | | | | | |
| Prosident: See attached officers/direct | tors rider | · | <u> </u> | ···· | · v · |
| Address: | | | | ** · · · · · · · · · · · · · · · · · · | 76 . <u>s</u> |
| | | | <u> </u> | | . 4.6 ელ |
| Vice President: | | | | | <u> </u> |
| | | | | | |
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| | | | | | <u> </u> |
| Secretary: | <u></u> | <u>, 409-11-11-11-11-11-11-11-11-11-11-11-11-11</u> | | <u>a na∰e, a _ea yêêaa _</u> | <u> </u> |
| Address: | | | <u> </u> | <u> </u> | |
| Treasurer: | , | <u></u> | 5 | <u>-</u> | <u>. </u> |
| Address: | | · · · · · · · · · · · · · · · · · · · | <u> </u> | *** | ~ |
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| NOTE: If necessary you may attach an addend | dum to the ap | plication listing | g additional o | fficers and/or d | irectors. |
| 13. MUSUU | | |) | | |
| (Signature of Chairman, Vice C | Chairman, or | any officer liste | d in number | 12 of the applic | ation) |
| 14. Lynn A. Feldman, Vice President | | | | <u> </u> | |
| (Typed or printed name | e and capacit | y of person sign | ung application | on) | |

Delaware

PAGE 3

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RCI HOLIDAY NETWORK INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO HAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JUNE, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RCI HOLIDAY NETWORK INC." WAS INCORPORATED ON THE SIXTH DAY OF NOVEMBER, O. A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

Warriet Smith Windson, Secretary of State

AUTHENTICATION: 2472158

DATE: 06-13-03

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