F/200000/252

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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SECALIABLY OF STATE
TALLAHASSEE, FLORID

N 03/22/12

COVER LETTER

TO:	New Filing Section Division of Corporations		
SUBJECT: VAIL RESORT RENTALS, INC.			
Name of corporation - must include suffix			
Dear S	Sir or Madam:		
"Certi		oration for Authorization to Transact Business in Florida," Good Standing" and check are submitted to register the sact business in Florida.	
Please	return all correspondence concerning	this matter to the following:	
	DAIE BUGBY		
	Thick impor	Name of Person	
	VALL RESORT RENT.	PALS	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
635 N. FRONTHE ROAD WEST #1			
Address			
VAIL, CD 81657			
City/State and Zip code			
Abugby @ Vai/resort rentals.com Email address: (to be used for future annual report notification)			
	• Email address: (to be used for future annual report nonneation)	
For fu	orther information concerning this matt	er, please call:	
DAVE HUBBY at (970) 476.0900			
Name of Person Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations	MAILING ADDRESS: New Filing Section Division of Corporations	
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314	
Enclo	sed is a check for the following amoun	it:	
W.	\$70.00 Filing Fee \$78.75 Filing F	Tee & \$78.75 Filing Fee & \$87.50 Filing Fee, Status Certified Copy Certificate of Status & Certified Copy	

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. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) COUNTY 3. 84-1423897 (FEI number, if applicable) 5. PRIETUAL
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) FORT MYERS, FL 33916 635 N. FRONTAGE ROAD WEST #1, VAIL CO 81657 (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 NOT acceptable) Name: Office Address: 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.

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 business addresses of officers and/or directors: A. DIRECTORS Chairman: ____ Vice Chairman: Address: Director: Address: _____ Director: ___ Address: **B. OFFICERS** President: _____ Vice President: Address: Secretary: Address: Treasurer: ___ Address: **NOTE:** If necessary, you may attach an adderdium to the application listing additional officers and/or directors. Signature of Director of Officer

The officer or director signing this document (and who is lighter number 12 above) affirms that the facts stated herein are true and that he or she is aware that 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.

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

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE

I, Scott Gessler, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

VAIL RESORT RENTALS, INC.

is a **Corporation** formed or registered on 08/06/1997 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19971123916.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/15/2012 that have been posted, and by documents delivered to this office electronically through 03/16/2012 @ 14:03:15.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Denver, Colorado on 03/16/2012 @ 14:03:15 pursuant to and in accordance with applicable law. This certificate is assigned Confirmation Number 8195975.



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Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Certificate Confirmation Page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site. http://www.sos.state.co.us/click Business Center and select "Frequently Asked Questions."