Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

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Account Name : ROGERS, TOWERS, BAILEY, ET AL, Account Number : 076666002273

: (904)398-3911

Fax Number

: (904)396-0663

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LIMITED LIABILITY COMPANY

ADC VACATIONS, LLC

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ARTICLES OF ORGANIZATION OF ADC VACATIONS, LLC

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, as the same may from time to time be amended (the "Act").

ARTICLE I

NAME

The name of the limited liability company (the "Company") is:

ADC VACATIONS, LLC

ARTICLE II

TERM

The existence of the Company shall commence upon filing of these Articles of Organization with the Florida Department of State and its existence shall be perpetual.

ARTICLE III

ADDRESSES

The initial mailing address of the Company is 60 Gulf Boulevard, Unit 105, Indian Rocks Beach, Florida 33785 and 841 Heritage Square, Decatur, Georgia 30033. The initial street address of the principal office of the Company is 841 Heritage Square, Decatur, Georgia 30033.

Prepared by: E. Allen Hieb, Jr. Florida Bar No. 354023 1301 Riverplace Blvd, Suite 1500 Jacksonville, Florida 32207 Ph. (904) 398-3911 1

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SECRETARY OF STATE
AND ASSEE, FLORID.

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ARTICLE IV

REGISTERED AGENT

The name and street address of the initial registered agent of the Company are as follows:

Frank Wood 60 Gulf Boulevard, Unit 105 Indian Rocks Beach, Florida 33785

ARTICLE V

LIMITED LIABILITY

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

IN WITNESS WHEREOF, the undersigned, being a Member of the Company has executed these Articles of Organization this 5^{th} day of April, 2001.

By: Anthony David Celalo
Anthony David Cebalo

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CENTIFICATE 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.

The name of the limited liability company is:

ADC VACATIONS, LLC

The name and the Florida street address of the registered agent are:

Frank Wood
50 Guif Boulevard, Unit 105
Indian Rocks Beach, Florida 33785

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SECRETARY OF STATE
ASSEE, FLORIDA

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.

Signature of Registered Agent

EDANK WOOD

PLANTAGE AND CONTRACTORS OF CITY OF CONTRACTORS MAY