Florida Department of State

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

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : FARR, FARR, EMERICH, SIFRIT, HACKETT AND CARR, P.A.

Account Number: 103654001666
Phone: (941)639-1159

Phone : (941)639-1158 Fax Number : (941)639-0028

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LIMITED LIABILITY COMPANY

SUNSHINE TRAVEL AGENCY, L.C.

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -- Name:

The name of the Limited Liability Company is:

SUNSHINE TRAVEL AGENCY, L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

SUNSHINE TRAVEL AGENCY, L.C.

Mailing Address:

c/o Jack O. Hackett II, Esquire

Farr, Farr, Emerich, Sifrit, Hackett & Carr, P.A.

Post Office Drawer 511447 Punta Gorda, Florida 33951-1447

Street Address:

115 W. Olympia Avenue

Punta Gorda, Florida 33950

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Jack O. Hackett II, Esquire Farr, Farr, Emerich, Sifrit, Hackett and Carr, P.A. 115 West Olympia Avenue Punta Gorda, Florida 33951-1447

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 as provided for in Chapter 608, F.S.

Jack O. Hackett II, Registered Agent

ARTICLE IV - Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Jack O. Hackett II, Authorized Representative of a member

Jack O. Hackett II

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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