

*Travel Creations* **L96000000545**

177-179 Sunny Isles Boulevard, North Miami Beach, Florida 33160  
Phone (505) 945-9599 Fax (505) 945-9140

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

May 7, 1996

50000181445  
-05/09/96--01029--003  
\*\*\*\*337.50 \*\*\*\*337.50

To-Whom-It-May-Concern:

Please find enclosed a check for \$337.50 and completed forms for the following:

- a) Articles of Organization and Affidavit
- b) Designation of Registered Agent
- c) Certified Copy

Should additional information be required, please feel free to contact me at the above address and/or telephone number.

**FILED**  
96 MAY -9 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Dmc*  
**5/15/96**

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**FILED**  
99 MAY -9 PM 1:25  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

TRAVEL CREATIONS, LC

**ARTICLE II - Address:**

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

177-179 SUNNY ISLES BLVD.  
MIAMI BEACH, FL 33160

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

TWENTY YEARS

**ARTICLE IV - Management:**

*(check and complete the appropriate statement)*

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

JOSEPH BLAU  
3589 SO. OCEAN BLVD.  
PALM BEACH, FL 33480

☐ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:  
SAME AS ABOVE

**ARTICLE V - Admission of Additional Members:**

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

BASED ON THE UNANIMOUS CONSENT OF ALL THE MEMBERS. NO NEW MEMBERS MAY BE ADMITTED WITHOUT UNANIMOUS CONSENT AND NO SALE OF ALL OR PART OF A MEMBER'S INTEREST SHALL OCCUR WITHOUT UNANIMOUS MEMBER'S CONSENT.

**ARTICLE VI - Members Rights to Continue Business:**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

UPON DEATH, THE COMPANY SHALL BE DISSOLVED UNLESS ALL SURVIVING THEN MEMBERS UNANIMOUSLY VOTE TO CONTINUE OPERATIONS.

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS**  
**FILED**

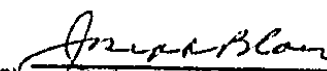
96 MAY -9 PM 1:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned member or authorized representative of a member of \_\_\_\_\_

TRAVEL CREATION, LC deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 70,000.00 .
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 20,000.00 . A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is \$ 90,000.00 . This total includes amounts from 2 and 3 above.

  
Signature of a member or authorized representative of a member.  
(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.)

**FILING FEE: \$ 250 for Articles of Organization and Affidavit**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

**FILED**  
96 MAY -9 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: \_\_\_\_\_

TRAVEL CREATIONS, LC

2. The name and address of the registered agent and office is:

MERRY C. BUTE

(Name)

1925 BRICKELL AVENUE - (1122)

(P.O. BOX not acceptable)

MIAMI, FL 33129

(City/State/Zip)

*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.*

*Merry C. Bute*

(Signature)

*May 7, 1996*

(Date)

**FILING FEE: \$ 35 for Designation of Registered Agent**