# M01600001959

#### TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: PAYU 2TRAVEL. COM		
(Name of corporation - must include suffix)		
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.		
Please return all correspondence concerning this matter to t	9000044505395 he following: -06/28/0101108013	
DEBORAH BUDAT	*****70.00 *****70.00	
(Name of Per	son) 1201-15134	
PAYU2TRAVEL, COM (Firm/Compa	UDOCIO 4492590-7  19) -07/23/01-01128-004  ******55.00 ******55.00  434550176 B	
755 WEST STATEBOAD 434, SUITE B		
(Address)		
LONGWOOD, FORIDA 32750 (City/State and Zip code)		
(City/State and Zip code)		
For further information concerning this matter, please call:		
ROSE ROBBINS at (407) 265-9450 FG Communication (Area Code & Daytime Telephone Number)		
(Name of Person) (Area Code	AlLING ADDRESS:	
Registration Section Re	AILING ADDRESS:	
	vision of Corporations	
	Ilahassee FL 32314	
Enclosed is a check for the following amount:	8.75 Filing Fee & S87.50 Filing Fee, 8/28	
	8.75 Filing Fee & S87.50 Filing Fee, S / 28' ertified Copy Certificate of Status & Certified Copy	



#### FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 5, 2001

DEBORAH BUDAI 755 WEST STATE RD, 434 STE B LONGWOOD, FL 32750

SUBJECT: PAYU2TRAVEL.COM, LLC

Ref. Number: W01000015374

We have received your document for PAYU2TRAVEL.COM, LLC and check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$55.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oather translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please 로메크 (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 301A00039870



# FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 27, 2001

DEBORAH BUDAI 755 WEST STATE RD, 434 STE B LONGWOOD, FL 32750

SUBJECT: PAYU2TRAVEL.COM, LLC Ref. Number: W01000015374

We have received your document for PAYU2TRAVEL.COM, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please Rall (850) 245-6097.

Michael Mays Document Specialist

Letter Number: 201A0004368

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: (Name of foreign limited liability company) (Jurisdiction under the law of which foreign limited liability company is organized) Duration: Year limited liability company will cease to Date of Organization) exist or "perpetual") Date first transacted business in Florida, (See sections 608.501, 608.502, and 817.155, F.S.) (Street address of principal office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: Interview

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

De-BORAH A BUDDE Typed or printed name of signee

## CERTIFICATE 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.

1. The name of the Limited Liability Company is:		
Pay U2 Travel. com		
2. The name and the Florida street address of the registered agent and office are:		
Debarah Rundai		
(Name)		
2908 Lageral Cove		
Florida street address (P.O. Box NOT ACCEPTABLE)		
OVIEDO FL 32765	AUG T	
City/State/Zip S = 2	22	
EFO	Ш	
Having been named as registered agent and to accept service of process for the above state		
liability company at the place designated in this certificate, I hereby accept the appointment as negistered		
agent and agree to act in this capacity. I further agree to comply with the provisions of all	etatutae	
relating to the proper and complete performance of my duties, and I am familiar with and a obligations of my position as registered agent as provided for in Chapter 608, F.S	ccept the	
alon CBelon		
(Signature)		

\$ 100.00 Filing Fee for Application

\$ 25.00

\$ 30.00

\$ 5.00

Designation of Registered Agent

**Certificate of Status (optional)** 

Certified Copy (optional)

#### $State\ of\ Delaware$

PAGE 1

### Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PAYU2TRAVEL.COM LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF AUGUST, A.D. 2001.

O1 AUG 28 AM 7: 54 SECRETARY OF STATE



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1291464

DATE: 08-13-01

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