ROGERS TOWERS

NO. 3890

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Account Name : ROGERS, TOWERS, BAILEY, ET AL

Account Number: 076666002273 : (904)398-3911 Phone Fax Number : (904)396-0663

FOREIGN LIMITED LIABILITY COMPANY

AC Expeditions, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

DIVISION OF CORPORATION

AM 9:

Department of State 6/8/2003 9:59 PAGE 1/1 RightFAX



Secretary of State

June 9, 2003

ROGERS, TOWERS, ET AL

SUBJECT: AC EXPEDITIONS, LLC

REF: W03000016284

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The designation of the registered office and the registered agent, both at the same Florida streat address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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

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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:

AC Expedition					
	(Name of forei	gn lin	nited liability company)		
Delaware		3.	65-1184806		
(Jurisdiction under the	e law of which foreign limited liabili pany is organized)	ŷ	(FEI number, if applicable)		
April 15, 2003		5	Perpetual		
(Date	of Organization)	:	(Duration: Year limited liability company will ce exist or "perpetual")	ase to	
Upon Qualifica			<u>. </u>		
(Date	first transacted business in Florids. (Sec s	ections 608.501, 608.502, and 817.155, F.S.)		•
9995 Gate Par	kway N., Suite 200	:			
Jacksonville, F	Florida 32246	;	;		
	(Street addi	ess o	principal office)	32° CO	_
If limited liability	y company is a manager-manag	od c	ompany, check here	HALL) (JOIR
The name and us	ual business addresses of the m	anag	ging members or managers are as follows:	100	,
Felix A. Craw	ford, Manager				
9995 Gate Pa	rkway N., Suite 200			7. E	;
Jacksonville, F	Florida 32246	ş	•	\$	
		;	·		
the jurisdiction under translation of the cert	rthe law of which it is organized. (A p tificate under oath of the translator mus	thotoc the s	ays old, duly authenticated by the official having custo copy is not acceptable. If the certificate is in a foreign is abmitted.) promoted in Florida: Any and all legal		
activities	100 0				
			orized representative of a member.		
	(In accordance with section 608,408(3 an affirmation under the penalties of		., the execution of this document constitutes y that the facts stated herein are true.)		
	Michael A. Wodrich, Auth		· · · · · · · · · · · · · · · · · · ·		
	Typed or prin	ted r	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:	
AC Expeditions, LLC	
2. The name and the Florida street address of the registered agent and office are:	O3 J SEU IALF
Michael A. Wodrich	JEN.
(Name)	vesi vesi
1	To E
1301 Riverplace Blvd., Suite 1500	<i>7.</i> =
Florida street address (P.O. Box NOT ACCEPTABLE)	TOPING 199
Jacksonville FI 32207	7
(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 opligations of my position as registered agent as provided for in Chapter 608, F.S.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AC EXPEDITIONS, 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 FIFTH DAY OF JUNE, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

Varriet Smith Hinden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2453900

DATE: 06-05-03

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