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(Re	equestor's Name)				
(Address)					
(Ac	ddress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MA!L			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to	Filing Officer:				
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FIELD NO. 26 PH 3: 42

#### 'CT CORPORATION SYSTEM

660 East Jefferson Street Tallahassee, Ft 3230April 26, 2004 Tel. 850 222 1092 Fax 850 222 7615

> Secretary of State, Florida 409 East Gaines Street Tallahassee FL 32399

Re:

Order #: 6088658 SO

8960 Customer Reference 1:

Customer Reference 2: 24798

Dear Secretary of State, Florida:

Please file the attached:

Preservation Row Sales Center, LLC (GA) Registration Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Jeffrey J Netherton Sr. Fulfillment Specialist Jeff\_Netherton@cch-lis.com

## 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:

1.	Preservation Row Sales Center, LLC				
	(Name of foreign limited liability company)				
2. (	Georgia 3. Ma				
	Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)				
4.	10/17/2001 5, Perpetual				
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")				
6.	Upon Qualification				
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)					
7.	215 Celebration Place, Suite 200				
	Celebration, FL 34747				
	(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:				
	Edward R. Ginn, III				
	215 Celebration Place, Suite 200				
	Celebration, FL 34747				
10.	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records 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: any and all lawful				
	business not specifically prohibited to profit LLC's under the laws of the state of Florida				
	Carly V. 3				
	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.)				

Typed or printed name of signee

Cassady V. Brewer, Esq.

## 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	f the Limited Liability	Company is:	
Preservation	Row Sales Center,	LLC	
2. The name ar	nd the Florida street ad	ddress of the registered agent and office are:	
	CT Corporation S	ystem	
	(Name)		<u>2</u>
	1200 South Pine Island Rd		
	Florida street address (P.O. Box NOT ACCEPTABLE)		7 7
	Plantation,	<sub>FL</sub> 33324	里 5
	(City/State/Zip)		25. <b>3: +2</b>
			5.7
Having been na	med as registered agei	nt and to accept service of process for the above sto	ated limited

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.

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

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

### **Secretary of State**

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530 CONTROL NUMBER : 0146140
DATE INC/AUTH/FILED: 10/17/2001
JURISDICTION : GEORGIA
PRINT DATE : 04/23/2004

FORM NUMBER : 211

MORRIS, MANNING & MARTIN
PENNY FARR
1600 ATLANTA FINANCIAL, 3343 PEACHTREE ROAD
ATLANTA, GA 30326

#### CERTIFICATE OF EXISTENCE

I, Cathy Cox, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that as of he above brint date

RESERVATION ROW SALES CHUTCH LLC GEORGIA LIMITED LIBELLIEV COMPANY

is in compliance with the approache filing and annual registration provisions of Title 14 of the Orticial Company of Title 14 of the Ortic

Said entity was formed in the jurisdiction affated above or was authorized to transact business in Georgia on the labove date and has not filed articles of dissolution, certificate of cancellation or any other similar document with the Office of the Settetary of State.

This certificate telate of the above-named entity as of the print date above. It does not certify whether or not a notice of intent to dissolve on application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State

This information is electronically transmitted, issued and certified in accordance with the Georgia Electronic Records and Signatures Act and Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

20040423155226202



Cathy Cox Secretary of State