MU5000000609

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Coples	Certificates of Status
Special Instructions	to Filing Officer:



700045699127

02/04/05--01054--012 **125.00

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

Ginn Clubs & Resorts, LLC	
(Name of Fo	oreign Limited Liability Company)
Georgia	3. 20-0532173 Fig. 3
(Jurisdiction under the law of which foreign li company is organized)	mited liability (FEI number, if applicable)
December 29, 2003	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
Upon qualificaton	
(Date first transacted (See sections 608.501	I business in Florida, if prior to registration.) & 608.502 F.S. to determine penalty liability)
215 Celebration Place, Ste 200	
Celebration, FL 34747	
	(Street Address of Principal Office)
If limited liability company is a mana The name and usual business addresse Robert F. Masters	es of the managing members or managers are as follows:
,	
One Hammock: Beach Parkway	
One Hammock: Beach Parkway Palm Coast FL 32137	
Palm, Coast, FI, 32137 Attached is an original certificate of existence, ne jurisdiction under the law of which it is organized instation of the certificate under oath of the translation.	to more than 90 days old, duly authenticated by the official having custody of records in ed. (A photocopy is not acceptable. If the certificate is in a foreign language, a ttor must be submitted.)
Palm, Coast, FI, 32137 Attached is an original certificate of existence, ne jurisdiction under the law of which it is organized instation of the certificate under oath of the translation. Nature of business or purposes to be	o more than 90 days old, duly authenticated by the official having custody of records in ed. (A photocopy is not acceptable. If the certificate is in a foreign language, a

Typed or printed name of signee

Penny J. Farr

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.

	——————————————————————————————————————	the		
2. The name	e and the Florida street add	ress of the registered agent and office are:		
	CT Corporation System			
		(Name)	- , , , , ,	· . *** *
	1200 South Pine Island	Road		
	Florida Stree	t Address (P.O. Box NOT ACCEPTABLE)		ž.
	Plantation	FL 33324		
		City/State/Zip		4

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, Florida Statutes.

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY
(Signature)

1. The name of the Limited Liability Company is:

\$ 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 : 0370797 DATE INC/AUTH/FILED: 12/29/2003 JURISDICTION : GEORGIA
PRINT DATE : 02/04/2005

FORM NUMBER

CT CORPORATION SYSTEM CINDY LAM 1201 PEACHTREE STREET, N.E.

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 the above print date

GINN CLUBS & RESORTS LLC

A GEORGIA LIMITED LIABILITY COMPANY

is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated

Said entity was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the jurisdiction stated above or was authorized to dissolution, certificate of cancellation or any other similar document with the Office of the Secretary of State.

This certificate relates only to the legal existence of the above named entity as of the print date above | It does not certify whether or not a notice of intent to dissolve an 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 issued and certified in entity is in existence or is authorized to transact business in this state.

20050204164110869



Cathy Cox Secretary of State.