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2005 FEB -4 PM 2: 44
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2007 CORPORATIONS

#### TRANSMITTAL LETTER

Registration Section TO: Division of Corporations SUBJECT: National Recreational Properties of Holiday Island, LLC (Name of Limited Liability Company) The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.. Please return all correspondence concerning this matter to the following: Michael L. Schack, Esq. (Name of Person) National Recreational Properties of Holiday Island, LLC (Firm/Company) 1 Mauchly (Address) Irvine, CA 92618 (City/State and Zip Code) For further information concerning this matter, please call: Michael L. Schack, Esq. (Area Code & Daytime Telephone Number) STREET ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations 409 E. Gaines Street P.O. Box 6327 Tallahassee, Florida 32399 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$130.00 Filing Fee &

Certificate of Status

☐ \$155.00 Filing Fee & **☑** \$160.00 Filing Fee, Certificate

of Status & Certified Copy

Certified Copy

□ \$125.00 Filing Fee

### 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:

National Re	creational Properties of Holiday Island, LLC	P So
•	(Name of Foreign Limited Liability Company)	<u> </u>
Arkansas =	3. 35-2241473	· · · · · · · · · · · · · · · · · · ·
(Jurisdiction to company is of	under the law of which foreign limited liability (FEI number	er, if applicable)
November 8	8, 2004 5 Perpetual	1
	(Date of Organization)  (Duration: Year limited lexist or "perpetual")	liability company will cease to
Not applica	ble	# 6 T
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability	y)
1 Mauchly,	Irvine, CA 92618	The second
	(Street Address of Principal Office)	
If limited 1	liability company is a manager-managed company, check here	์ ส <sup>∵</sup>
II IIIIIICO I	idonity company is a manager-managed company, encek nere p	
The name	and usual business addresses of the managing members or manag	gers are as follows:
Jeffrey P. F	Frieden, 1 Mauchly, Irvine, CA 92618	And M
Robert D. I	Friedman, 1 Mauchly, Irvine, CA 92618	
		<u>:</u>
	<u></u>	1
jurisdiction un unslation of the	n original certificate of existence, no more than 90 days old, duly authenticated by nder the law of which it is organized. (A photocopy is not acceptable. If the certificent under oath of the translator must be submitted.)  business or purposes to be conducted or promoted in Florida:	icate is in a foreign language, a
National Red	creational Properties of Holiday Island, LLC	
	Mal Al	
	Signature of a member or an authorized representative of (In accordance with section 608.408(3), F.S., the execution of this docume an affirmation under the penalties of perjury that the facts stated herein are	ent constitutes
	Michael L. Schack, Esq., General Counsel	1 . %
	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.	1. The name of the Limited Liability Company is:	.Q. 2	
Na	National Recreational Properties of Holiday Island, LLC	2005 F	
2.	2. The name and the Florida street address of the registered agent and office are:	WARSE HILL	-
	Robert Dady, Esq., c/o Fieldstone, Lester, Shear & Denberg, LLP	THE PARTY	
	(Name)	RATIONAL TO SERVICE AND THE SE	
	Suntrust Plaza, 201 Alhambra Circle, Suite 601	SHONS	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Coral Gables FL 33134		
	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 as provided for in Chapter 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



# **Arkansas Secretary of State Charlie Daniels**

State Capitol Building + Little Rock, Arkansas 72201-1094 + 501.682.3409



#### **CERTIFICATE OF GOOD STANDING**

I, Charlie Daniels, Secretary of State of the State of Arkansas, and as such, keeper of the records of domestic and foreign corporations, do hereby certify that the records of this office show

## NATIONAL RECREATIONAL PROPERTIES OF HOLIDAY ISLAND, LLC

authorized to transact business in the State of Arkansas as a Limited Liability Company, filed Articles of Organization in this office November 08, 2004.

Our records reflect that said entity, having complied with all statutory requirements in the State of Arkansas, is qualified to transact business in this State.



In Testimony Whereof, I have hereunto set my hand and affixed my official Seal. Done at my office in the City of Little Rock, this 8th day of November 2004.

Charlie Daniels Secretary of State

By: S. VAN CAMP