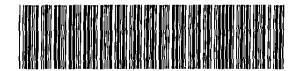
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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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2005 SEP 15 AM ID: 30
DIVATIONSSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Sec Division of Corp			
SUBJECT: AMBASSA	DOR GOLF CLUB, LLC		
	(Name of Lim	ited Liability Company)	
Florida," Certificate of F			orization to Transact Business in ove referenced foreign limited
Please return all corresp	ondence concerning this m	natter to the following:	
	PATRICK SHANK		
	(Na	me of Person)	200 01;
			is se
HOLLAND AN	ID KNIGHT LLP		
	(Fir	m/Company)	P 5 M 10: 30 AH SSEE, FLORID
2099 PENNS	YLVANIA AVENUE NW		프렛 휴
	((Address)	30 ABOA
WASH	INGTON DC 20006		
	(City/Sta	ate and Zip Code)	
For further information of	oncerning this matter, plea	ase call:	
PATRICK SHANK		at (202) 457-595	58
(N	ame of Person)		ne Telephone Number)
STREET ADDR	ESS:	MAILING ADD	DRESS:
Registration Section		Registration Sect	
Division of Corporations		Division of Corp	
409 E. Gaines Street		P.O. Box 6327	
Tallahassee, Florida 32399		Tallahassee, Flor	ida 32314
Enclosed is a check for the	ne following amount:		
□ \$125.00 Filing Fed	e □ \$130.00 Filing Fee & Certificate of S		☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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 Fe	oreign Limited Li	ability Company)
DELAWARE	2	N/A
(Jurisdiction under the law of which foreign li company is organized)	mited liability	(FEI number, if applicable)
AUGUST 2, 2005	5.	PERPETUAL P
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")
, N/A		ESS.
(Date first transacte		ida, if prior to registration.) o determine penalty liability)
8825 PERIMETER PARK BOULEVARD,	SUITE 502	OR.
JACKSONVILLE, FLORIDA 32216		77
	(Street Address of	Principal Office)
. If limited liability company is a mana	ger-managed c	ompany, check here
. The name and usual business address	es of the manas	zing members or managers are as follows:
		2
RESORT CLUBS INTERNATIONAL, IN		-
RESORT CLUBS INTERNATIONAL, IN		-
RESORT CLUBS INTERNATIONAL, INC. 8825 PERIMETER PARK BOULEVARD	C MANAGING	-
	C MANAGING	-
8825 PERIMETER PARK BOULEVARD JACKSONVILLE, FLORIDA 32216 0. Attached is an original certificate of existence, n	C MANAGING), SUITE 502 10 more than 90 da ed. (A photocopy i	ys old, duly authenticated by the official having custody of received acceptable. If the certificate is in a foreign language, a
8825 PERIMETER PARK BOULEVARD JACKSONVILLE, FLORIDA 32216 0. Attached is an original certificate of existence, in the jurisdiction under the law of which it is organizated and the certificate under oath of the translation.	C MANAGING D. SUITE 502 DO more than 90 da cd. (A photocopy into must be submit	ys old, duly authenticated by the official having custody of received acceptable. If the certificate is in a foreign language, a
8825 PERIMETER PARK BOULEVARD JACKSONVILLE, FLORIDA 32216 0. Attached is an original certificate of existence, in the jurisdiction under the law of which it is organize anslation of the certificate under oath of the translation. 1. Nature of business or purposes to be	c MANAGING D, SUITE 502 Domore than 90 da ed. (A photocopy into must be submit conducted or p	ys old, duly authenticated by the official having custody of received acceptable. If the certificate is in a foreign language, a sted.)
8825 PERIMETER PARK BOULEVARD JACKSONVILLE, FLORIDA 32216 0. Attached is an original certificate of existence, in the jurisdiction under the law of which it is organize anslation of the certificate under oath of the translation. 1. Nature of business or purposes to be	c MANAGING D, SUITE 502 Domore than 90 da ed. (A photocopy into must be submit conducted or p	ys old, duly authenticated by the official having custody of reors not acceptable. If the certificate is in a foreign language, a med.) bromoted in Florida: ANY LAWFUL ACT OR
JACKSONVILLE, FLORIDA 32216 O. Attached is an original certificate of existence, in the jurisdiction under the law of which it is organize anslation of the certificate under oath of the translation. Nature of business or purposes to be ACTIVITY FOR WHICH A LIMITED LIABLE Signature of a men (In accordance with section).	C MANAGING A. SUITE 502 DO MORE than 90 de col. (A photocopy in conducted or particular conducted	ys old, duly authenticated by the official having custody of reors not acceptable. If the certificate is in a foreign language, a med.) bromoted in Florida: ANY LAWFUL ACT OR

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.

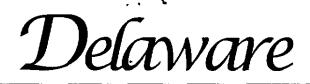
	or GOLF CLUB, LLC	отралу is:	
2. The nan	ne and the Florida street addre	ess of the registered agent and office are:	2005 SEP
	Corporation Service	e Company	EP 15
		(Name)	SEE
Florida Street Address (P.O. Box NOT ACCEPTABLE)			ID: 30 PLORIDA
	Tallahassee	FL 32301	Çr.
		City/State/Zip	

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.

Corporation Service Company

(Signature)

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



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AMBASSADOR GOLF CLUB 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 AUGUST, A.D. 2005.





Darriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4074682

DATE: 08-05-05