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SECRETARY OF TAI

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. COVER LETTER							
TO: Registration Section Division of Corporations							
SUBJECT: Festiva Resorts, 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:							
Miriam Day, Legal Assistant							
(Name of Person)							
Festiva Resorts, LLC (Firm/Company)							
One Vance Gap Road							
(Address)							
Asheville, NC 28805							
(City/State and Zip Code)							
For further information concerning this matter, please call:							
Miriam Day, Legal Assistant at 828 254-3378, ext. 312							
(Name of Person) (Area Code & Daytime Telephone Number)							
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301							
Enclosed is a check for the following amount: \$\Bigsiz \frac{1}{3}\$125.00 Filing Fee \$\Bigsiz \frac{1}{3}\$130.00 Filing Fee & \$\Bigsiz \frac{1}{3}\$155.00 Filing Fee & \$\Bigsiz \frac{1}{3}\$160.00 Filing Fee, Certificate Copy Certificate of Status Certified Copy 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:

LIMITED LIABILITY CO	IMPAINT TO TRAINSACT BUSINESS	N ITTE	STATE OF FLORIDA.		
1. Festiva Resor	ts, LLC				
	(Name of Foreign L	imited Li	ability Company)		
_{2.} Nevada		3.	56-2205189		
(Jurisdiction under the company is organize	he law of which foreign limited li ed)	ability	(FEI number, if applicable	e)	***
_{4.} August 14, 2		5.	Perpetual		
(Date	of Organization)		(Duration: Year limited liability compa exist or "perpetual")	ny will cease to	
6. November 1,					
	(Date first transacted busine (See sections 608.501 & 608.	ss in Flor 502 F.S.	ida, if prior to registration.) to determine penalty liability)		
7					
One Vance G	Sap Road, Asheville, N	2880	5		
	(Street 2	Address o	f Principal Office)		
8. If limited liabilit	ty company is a manager-ma	anaged o	company, check here		
9. The name and u	sual business addresses of th	ie mana	ging members or managers are as fo	oilows:	
Horbort H. De	atriak Ir. Ona Vanca G	on Bor	nd Ashovilla NC 28905		
neibeit n. Fa	atrick, Jr. , One Vance G	ap No	id, Asileville, NC 20005		
Donald K. Cl	ayton, One Vance Gap	Road,	Asheville, NC 28805		
•					
-				 	
10. Attached is an origin	nal certificate of existence, no more	than 90 d:	nys old, duly authenticated by the official hav	ring custody of reco	ords in
			is not acceptable. If the certificate is in a for		
translation of the certific	ate under oath of the translator mus	t be subm	itted.)		
11. Nature of busir	ness or purposes to be condu	icted or	promoted in Florida: Sales and I	nanagement	
of timeshare			•		-
Of difficulties	100010.			·	•
	/(alust)	<i>1</i>		95. ALL:	
			norized representative of a member.	A26 8	-
			the execution of this document constitutes y that the facts stated herein are true.)	And Y	П
	Herbert H. Patrick,		.	2135 XX	_
	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. The name of the Limited Liability Con	mpany is:		
Festiva Resorts, LLC		- Nac. sa	
2. The name and the Florida street addre	ss of the registered agent and offic	e are:	
NRAI Services, Inc	c.	- -	
	(Name)		
2731 Executive F	Park Drive, Suite 4		* = * - st
Florida Street A	Address (P.O. Box NOT ACCEPTABLE)		
Weston	FL 33331		
	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.

Lie Wacer Goot Secs.
(Signature)

\$ 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



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, DEAN HELLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, FESTIVA RESORTS LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 14, 2000, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 21, 2005.

DEAN HELLER Secretary of State

Certification Clerk