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SUFFICIENCY OF FILMS

DIVISION -2 AN ILLS

November 2, 2006

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301



Re:

Order #: 6772933 SO

Customer Reference 1: 16914-54743

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Ginn Tribute, LLC (GA) Registration

Florida

Ginn Open, LLC (GA)

Registration Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

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

Thank You!

Convie Bryan

COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	OPE I
SUBJECT: Ginn Open, LLC	
	nited Liability Company)
	ability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited
Please return all correspondence concerning this r	natter to the following:
Penny J. Farr	<u> </u>
(N	ame of Person)
Morris Manning & Martin, I	_LP
(F)	irm/Company)
3343 Peachtree Road,	Suite 1600
	(Address)
Atlanta, Georgia 30326	3
(City/S	tate and Zip Code)
For further information concerning this matter, pl	ease call:
Penny J. Farr	at (404) 504-5468
(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: [2] \$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:
1. Ginn Open, LLC
(Name of Foreign Limited Liability Company)
2. Georgia 3. 20-5688837
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
company is organized)
4. 10/10/2006 5. perpetual 7
(Date of Organization) (Duration: Year limited liability company will cease to
exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7 215 Celebration Place, Suite 200
7. 213 Celebration Flace, 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:
21 120 mains and assure submess agenesses of the managing members of managers are as follows.
Robert F. Masters
One Hammank Banch Barlaver
One Hammock Beach Parkway
Palm Coast, Florida 32137
Taisi Codoi, Florida GE 101
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in
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
Nenny & tare
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.) Penny J. Farr
Typed or printed name of signee
r Abor or brunon units of gights

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.

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)
CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

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

Control No. 0686559

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

GINN OPEN, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 10/10/2006 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of 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 date issued. 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 certificate is issued pursuant to 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.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 10th day of October, 2006

Cathy Cox Secretary of State

Certification Number: 333295-1 Reference:

Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp