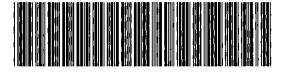
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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
M.	

Office Use Only



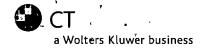
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SECRETARY OF STATE
ALLIAM ASSET OF STATE



1203 Governors Square Blvd. Tallahassee, FL 32301-2960 850 222 1092 tel *850 222 7615 fax *** ** www.ctlegalsolutions.com

November 22, 2006

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301 OS MOU 22 PAIRS: 15

Re: Order #: 6787192 SO

Customer Reference 1: 11995-36482

Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Ginn Sundancer, LLC (GA) Qualification 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.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

COVER LETTER

PALLAHASSEE SEE

TO: Registration Section **Division of Corporations**

SUBJECT: Ginn Sundancer, 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:

Penny J. Farr
(Name of Person)
Morris Manning & Martin, LLP
(Firm/Company)
3343 Peachtree Road, Suite 1600
(Address)
Atlanta, Georgia 30326
(City/State and Zip Code)
formation concerning this matter, please call:

Penny J. Farr	_{at (} 404 ₎ 504-5468
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:	STREET ADDRESS:
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

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

N COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOR IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	<i>≀EIG</i> N
Ginn Sundancer, LLC	
(Name of Foreign Limited Liability Company)	M
Georgia (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) (FEI number, if applicable)	0
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	•
. 1//21/06 5. perpetual (Duration: Year limited liability company will cease to	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
Upon qualification	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
215 Celebration Place, Suite 200	
Celebration, FL 34747	
(Street Address of Principal Office)	
. If limited liability company is a manager-managed company, check here 🗸	
. The name and usual business addresses of the managing members or managers are as follows:	
Robert F. Masters	
One Hammock Beach Parkway	
Palm Coast, Florida 32137	
0. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recorne jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under oath of the translator must be submitted.)	rds in
1. 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	
Denux Fare	
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	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

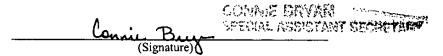
PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

FLORIDA.	
1. The name of the Limited Liability Company is:	
Ginn Sundancer, LLC	

2. The name and the Florida street address of the registered agent and office are:

CT Corporation Sy	rstem
	(Name)
1200 South Pine	Island Road
Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)
Plantation	_{FL} 33324
,	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.



\$ 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. 06100183

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 SUNDANCER, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 11/21/2006 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 22nd day of November, 2006

Cathy Cox Secretary of State

Certification Number: 407107-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/oorp/soskb/verify.asp