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SECRETARY OF STATE
LLAHASSEE F. STATE

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: VACATION BICYCLING LLC (Name of Limit	ted Liability Company)
	oility Company for Authorization to Transact Business in omitted to register the above referenced foreign limited
Please return all correspondence concerning this ma	atter to the following:
JOSEPH FOX	
(Nan	ne of Person)
VACATION BICYCLING LLC	01 53
(Fim	n/Company) LCAHAS
191 EAST BROAD ST, S	STE 309 Address) Apr -
	Address)
ATHENS, GA 30601	9: 5 o
(City/Sta	te and Zip Code)
For further information concerning this matter, plea	se call:
JOSEPH FOX	_at (_404) _909-8034
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations	STREET ADDRESS: Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\Bigsim \\$125.00 \text{ Filing Fee} \Rightarrow \\$130.00 \text{ Filing Fee & Certificate of S}\$	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate 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:

1. VACATION BICYCLING LLC	_
(Name of Foreign Limited Liability Company)	
2. STATE OF GEORGIA, USA 3. 20-8201836	_
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4. JANUARY 10, 2007 5. PERPETUAL	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	_
6. MAY 5, 2007	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	_
7. 191 EAST BROAD ST, STE 309	
ATHENS, GA 30601	
ATHENS, GA 30601 TO Street Address of Principal Office)	
	Ξ Π
8. If limited liability company is a manager-managed company, check here	<u> </u>
9. The name and usual business addresses of the managing members or managers are action lows.	
CHANDRA FOX, 1335 WHIT DAVIS ROAD, ATHENS, GA 30605	
JOSEPH FOX, 1335 WHIT DAVIS ROAD, ATHENS, GA 30605	_
DOCET THE OX, TOOL WITH DAVIE HEAD, ATTREME, CAROLOGO	-
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of re	
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: BICYCLE VACATIONS	<u>S</u>
The state of the s	_
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.)	
JOSEPH FOX	

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 Company is:

VACATION BICYCLING LLC

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

JAMES FOX				
(Name)		TAL	70	
3011 WILSON BLVD, N		ECRE LAH	2001 APR	
Florida Street Address (P.O. Box NOT ACCEPTABLE)		TAR ASS	=	
NAPLES,	_{FL} 34120	Y OF S	-	
City/State/Zip		TATE	2. خ	
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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)

Control No. 07002869

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, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

VACATION BICYCLING LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 01/10/2007 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 5th day of April, 2007

Karen C Handel Secretary of State

Kaen C. Handel

Certification Number: 1185550-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp