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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE

T. CLINÉ

DEC - 8 2008

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 25, 2008

SHEREE BROWN 18942 STATE HWY 13, STE. F-328 BRANSON WEST, MO 65737

SUBJECT: HOLIDAY PLANNERS LLC

Ref. Number: W08000053196

We have received your document for HOLIDAY PLANNERS LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1138.75.

The document must contain the names and street addresses of the members or managers of the limited liability company.

Please return your document, along with a copy of this letter, within 60 days, or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 308A000584272

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: Holiday Planners LLC	
	nited Liability Company)
	ability Company for Authorization to Transact Business in ubmitted to register the above referenced foreign limited
Please return all correspondence concerning this n	natter to the following:
Sheree Brown	
(Na	ame of Person)
Holiday Planners LLC	
(Fi	rm/Company)
18942 State Hwy. 13, Ste.	F-328
	(Address)
Branson West, MO 65737	
(City/St	tate and Zip Code)
For further information concerning this matter, ple	ease call:
Sheree Brown	, , , , , , , , , , , , , , , , , , ,
(Name of Person)	at (417) 272-1601
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
	Tananassee, 1 D 32301
Enclosed is a check for the following amount: \$\sum_\$125.00 Filing Fee \$\sum_\$\$130.00 Filing Fee & Certificate of	\$155.00 Filing Fee & \$\subseteq\$\$\$160.00 Filing Fee, Certificate of Status & Certified Copy



December 2, 2008

Florida Department of State Division of Corporations ATTN: Tammi Cline P.O. Box 6327 Tallahassee, FL 32314

Ms. Cline,

Thank you for your prompt return call today. As we discussed please let this letter serve as my request to clarify and correct the answer that was placed in Item 6 of the Application by Foreign LLC for Authorization to Transact Business in Florida.

The person in our office who filled out this item filled it in incorrectly. December of 2007 is when we applied for our license but we did not start our operations within the State of Florida until late January/February of 2008. Those dates were after we received our license to be a Seller of Travel.

Therefore we should not be charged the civil penalty of \$1000. Thank you for your help in this matter and I have enclosed the original document with this letter to complete the renewal.

Sincerely,

Jeff Brown, CEO Holiday Planners

Enc.

SECRETARY OF STATE

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. Holiday Planners LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "LLC.")
2. Missouri (Jurisdiction under the law of which foreign limited liability) 3. 20-2026862 (FEI number, if applicable)
company is organized)
4. 2003 (Date of Organization) (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
5 12/2007 (see Attached Letter)
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. Sheree Brown, Holiday Planners LLC, 三党 署
18942 State Hwy. 13, Ste. F-328, Branson West, MO 65737 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
2). The name and usual business addresses of the managing members or managers are as follows:
Sheree Brown Jeff Brown
18942 St. Hwy 13 Ste F-328 18942 St. Hwy 13 Ste F-328
Branson West Mo 65737 Branson West MO 65737
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 ranslation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Sellers of Travel
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.)

Typed or printed name of signee

Sheree Brown

1 -

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

1. The nam	e of the Limited Liability Company	y is:	
Holiday I	Planners LLC		
ไร์ พละกอ บทล	vailable, the alternate name to be u	used in the state of Florida is:	
2. The nam	e and the Florida street address of t	the registered agent and office are:	
•	Agents and Corporation	ons, Inc.	
		(Namc)	
	300 Fifth Avenue Soul	th, Suite 101-330	
	Florida Street Address	R (P.O. Box NOT ACCEPTABLE)	至22
	Naples, Florida 34102	2 1.1	2008 DEC SECRETA
		Chy/Shie/Ap	ET C
liability com agent and ap relating to th	pony at th <mark>e place</mark> designated in this gree to act in this capacity. I further w proper and complete performance	accept service of process for the above stated limited vertificate, I hereby accept the appointment as register agree to comply with the provisions of all statutes e of my duties, and I am familiar with and accept the provided for in Chapter 608, Placida Statutes.	TARY OF STATE ASSEE, FLORIGA
10.	\$ 25.00 1	Filing Foe for Application Designation of Registered Agest Certified Copy (optional) Certificate of Status (optional)	•

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

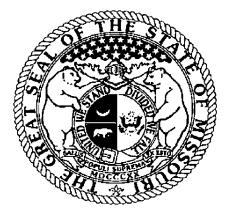
I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

HOLIDAY PLANNERS LLC LC0628239

was created under the laws of this State on the 20th day of December, 2004, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 21st day of November, 2008

Secretary of State



Certification Number: 11252262-1 Reference:

Verify this certificate online at http://www.sos.mo.gov/businessentity/verification