Note: Please print this page and use it as a cover sheet. Type the fax audit

number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Foreign Limited Liability Company THE CONVENTION STORE, INC.

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 06 |
| Estimated Charge | \$125.00 |

COVER LETTER

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| TO: Registration Section | | |
| Division of Corporations | | |
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| SUBJECT: THE CONVENTION STORE, LLC | LC . | |
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| Existence, and eneck are submitted to register the | he above referenced foreign limited liability company to transact business in | Piorx |
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| | rstamer@theconventionstoro.com | |
| R-mail address: | a: (to be used for future annual report notification) | |
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| For further information concerning this matter, ple | nlesse call: | |
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| A | • | |
| Probabah strange | at (41/1) 956-0001 | |
| Name of Person | Arca Code & Daytime Telephone Number | |
| V-1 | | |
| MAILING ADDRESS: | STREET ADDRESS: | |
| Division of Corporations | Division of Corporations | |
| Registration Section | Registration Section | |
| P.O. Box 6327 | Clifton Building | • |
| Tallahasser, FL 32314 | 2561 Executive Center Circle | • |
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| □ \$125.00 Filing Fee □ \$130.00 Fili | iling Fee & States States & St | |
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. THE CONVENTION STORE, 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. Maryland 3 61 1554827 (Jurisdiction under the law of which foreign limited liability (FBI number, if applicable) company is organized) 4, 01/31/2008 Perpetual (Duration: Year limited liability company will coase to (Date of Organization) exist or "perpetual") 6. Upon Qualification (Date first transacted business in Ftorida, if prior to registration.)
(See sections 608.501 & 608.502 P.S. to determine penalty liability) 2981 Solomons Island Road, Edgewater, MD 21037 (Street Address of Principal Office) 8. If [imited 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: Sean T. Higgins, 2981 Solomons Island Road, Edgewater, MD 21037 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.) Nature of business or purposes to be conducted or promoted in Florida: SEE ATTACHMENT Signature of a member or any athorized 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 stained herein are true.)

Sean T. Higgins
Typed or printed name of signee

Attachment to Florida

Nature of the LLC's Business

Engage in the business of providing transportation management services for public/private facilities, to lease and operate park facilities, and to engage in any other lawful purpose.

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 th | e Limited Liability Company is: | |
|---------------------|--|--|
| THE CONVENTION | I STORE, LLC | |
| If unavailable, the | alternate to be used in the state of Florida is: | |
| 2. The name and | the Florida street address of the registered agent and office are: | |
| • | C T Corporation System | |
| _ | (Namo) | |
| | | |
| | 1200 South Pine Island Road | |
| | Florida Street Address (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.

CI Corporation Statem

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\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES, OR THE RIGHTS OF LIMITED LIABILITY COMPANIES TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT THE CONVENTION STORE, LLC IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS MARCH 01, 2010.

Paul B. Anderson Charter Division



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410) 333-7097

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