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C. LEWIS

OCT 22,2010

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 15, 2010

LINDA FOX TRAVEL LEADERS GROUP 6442 CITY WEST PARKWAY EDEN PRAIRIE, MN 55344

SUBJECT: TZELL TRAVEL, LLC Ref. Number: W10000048460

We have received your document for TZELL TRAVEL, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 810A00024428



October 13, 2010

Florida Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Tzell Travel, LLC

Dear Sir/Madam:

Enclosed please find our application foreign limited liability company for authorization to transaction business in Florida. You should note that we have also submitted our Seller of Travel Registration.

Linda J. Fox

Manager, Franchise Administration

Travel Leaders

952-914-6755 (Phone)

lfox@travelleaders.com

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Tzell Travel, 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:
Linda Fox
Name of Person
Travel Leaders Group
Firm/Company
6442 City West Parkway
Address
Eden Prairie, MN 55344
City/State and Zip Code
lfox@travelleaders.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Linda Fox at (952) 914-6755
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32301
Enclosed is a check for the following amount: \$\sigma\$\$ \$\sigma\$\$\$ \$\sigma\$\$ \$\sigma\$\$\$

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. Tzell Travel, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
Nexion	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wriconsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	
2. New York (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
company is organized)	
4. 7/9/2003 5. Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. Date of filing	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	-4 /
7. 119 West 40th Street,	٢
New York, New York 10018	٢
(Street Address of Principal Office)	`
New York, New York 10018 (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:	
John D. O'Hara , Sole Manager, 6442 City West Parkway, Eden Prairie, MN 55344	
Barry Liben, President/CEO, 119 West 40th Street, New York, NY 10018	
Willia Lynch, Secretary/Treasurer, 119 West 40th Street, New York, NY 10018	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record 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.)	lsin
11. Nature of business or purposes to be conducted or promoted in Florida: Travel services	
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)	
John D. O'Hara	

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.

	f the Limited Liability Company is: avel, LLC	
If unavailable,	the alternate to be used in the state of Florida is:	
2. The name a	nd the Florida street address of the registered agent and office are:	71
	Corporation Service Company	F. I.
	(Name)	1 2 C
	1201 Hays Street	SEEF. I
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	9. 9.
	Tallahassee, FL 32301	元 元 元 元 元 元 元
	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)

State of New York Department of State } ss:

I hereby certify, that TZELL TRAVEL, LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 07/09/2003, and that the Limited Liability Company is existing so far as shown by the records of the Department.



F

WITNESS my hand and the official seal of the Department of State at the City of Albany, this 06th day of October two thousand and ten.

First Deputy Secretary of State