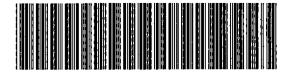
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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
OCT 1'5'2012) S. TONER	

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FILED
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Religious Travel and	
Nam	ne of Limited Liability Company
	lity Company for Authorization to Transact Business in Florida," Certificate of ove referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this mat	tter to the following:
Tammy Davis	
	Name of Person
Religious Travel and To	urs LLC
	Firm/Company
918 Ponte Vedra Blvd	
	Address
Ponte Vedra Beach, FL	. 32082
	City/State and Zip Code
tdavis@timelesstrav	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter, pleas	e call:
Tammy Davis	at (832) 236-4429
Name of Person	Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations	STREET ADDRESS:
Registration Section	Division of Corporations Registration Section
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amoun	ıt:
\$125.00 Filing Fee \$130.00 Filing Fee	& \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate

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. Religious Travel and Tours LLC				
(Name of Foreign Limited Liability Company; mu	st include "Limited Liability	Company," "L.L.C.," o	or "LLC.")	
(If name unavailable, enter alternate name adopted for the consent of the managers or managing members adopting to Company," "L.L.C," "LLC.")	e purpose of transacting busing the alternate name. The altern	ness in Florida and attac nate name must include	h a copy of the writt "Limited Liability	tten
2. Texas	3. 37-1557417			
(Jurisdiction under the law of which foreign limited lial company is organized)	bility (FEI	number, if applicable)		
4. 10-23-2007	5. Perpetual			
(Date of Organization)	(Duration: Year I exist or "perpetua	imited liability compan al")	y will cease to	
6.				
(Date first transacted busines (See sections 608.501 & 608.5	is in Florida, if prior to registr 102 F.S. to determine penalty	ration.) liability)		
7. 1021 Main St, Suite 1150			· · · · · · · · · · · · · · · · · · ·	
Houston, TX 77002		į		
	ddress of Principal Office)		第三 F	
8. If limited liability company is a manager-man	naged company, check h	nere 🗹	部門日	
9. The name and usual business addresses of the	e managing members or	managers are as fo	llows ?	
Tammy Davis			製品を	
918 Ponte Vedra Blvd				
Ponte Vedra Beach, FL 32082	2			
10. Attached is an original certificate of existence, no more of the jurisdiction under the law of which it is organized. (A plut translation of the certificate under outh of the translation must	notocopy is not acceptable. If t			sin
11. Nature of business or purposes to be conduc	cted or promoted in Flor	ida: Travel Ser	vices	
(In accordance with section 608.408(3), F.S., penalties of perjury that the facts stated here document to the Department of State con Tammy Davis	the execution of this document of the first true. I am aware that any	constitutes an affirmation ty y false information subt	mitted in a	

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED ACENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608-415 of 608-507, PLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESKINATE A REGISTERED OFFICE AND REGISTERED ACTENT IN THE STATE OF FLORIDA.

The same and the Flor	ida street address	of the registered agent and of	lice are:
NRAI S	ervices, Inc		
		(Nemc)	
515 Ea	st Park Ave		
	Florida Street Ad	dress (P.O. tica. <u>PART)</u> ACCEPTABLE)
Tallah	asse9	EL 32301	_
		City/Atmo/City	

\$104.00 Sling Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.88 Certificate of Status (optional)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



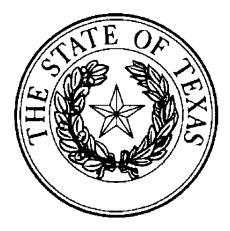
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Religious Travel and Tours LLC (file number 800887797), a Domestic Limited Liability Company (LLC), was filed in this office on October 23, 2007.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on October 10, 2012.



Phone: (512) 463-5555

Prepared by: SOS-WEB

Hope Andrade Secretary of State