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EXAMINER



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ION SENTICE GUMPANI							
ACCOUNT NO. : 12000000195							
REFERENCE : 449728 5057006							
AUTHORIZATION:							
COST LIMIT : \$ 125.00							
ORDER DATE : December 7, 2012							
ORDER TIME : 1:03 PM							
ORDER NO. : 449728-005							
CUSTOMER NO: 5057006							
FOREIGN FILINGS							
NAME: RESORTS.COM, LLC							
XXXX QUALIFICATION (TYPE: LL)							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING							
CONTACT PERSON: Carina L. Dunlap EXT# 52951							
EXAMINER:							

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:

Resorts.Com, 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 consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")	
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 90-0863599 (FEI number, if applicable)	
4. 05/31/2012 (Date of Organization) 5. Perpetual' (Duration: Year limited liability company will cease to exist or "perpetual")	
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7, 1000 South Pine Island Road, Suite 800	
Plantation, FL 33324	1
(Street Address of Principal Office)	y one.
8. If limited liability company is a manager-managed company, check here	Program
9. The name and usual business addresses of the managing members or managers are as follows:	Contract of
Kerener International Resorts, Inc.	
1000 S Pine Island Road, Suite 800	
Plantation, Ma 33324	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receive 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 translation must be submitted.)	ords in
11. Nature of business or purposes to be conducted or promoted in Florida: Online travel sales	
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.)	

An Hel Maylewes
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	of the Limited Liabili	ly Comp	pany is:	
Resorts.Com,	LLC			
If unavailable,	the alternate to be us	ed in the	e state of Florida is:	
2. The name a	nd the Florida street	address	of the registered agent and office are:	
•	Corporation Service	e Compa	any	
			(Name)	
	1201 Hays Street			
	Florida S	treet Add	ress (P.O. Box <u>NOT</u> ACCEPTABLE)	
	Tallahassee		FL 32301	
			City/State/Zip	
liability compa agent and agre relating to the p	ny at the place design e to act in this capacit proper and complete p	ated in th y. I furth erforma ed agent	to accept service of process for the above stables certificate, I hereby accept the appointment her agree to comply with the provisions of ance of my duties, and I am familiar with and as provided for in Chapter 608, Florida Stables (Carina L. Asst. Vice	nent as registered all statutes d accept the latutes.
	\$	100.00	Filing Fee for Application	
		25.00	Designation of Registered Agent	
	\$ \$	30.00 5.00	Certified Copy (optional) Certificate of Status (optional)	

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "RESORTS.COM, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE SEVENTH DAY OF DECEMBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "RESORTS.COM, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MAY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5163007 8300

121309032

UTHENTACATION: 0044795

DATE: 12-07-12

Jeffrey W. Bullock, Secretary of State

You may verify this certificate online at corp.delaware.gov/authver.shtml