Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

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

Email Address:

Foreign Limited Liability Company WALKING PATH TRAVEL, LLC

Certificate of Status Certified Copy Page Count Estimated Charge

K. SALY EXAMINES

Electronic Filing Menu Corporate Filing Menu

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\$155.00

COVER LETTER

TO;	Registration Section
	Division of Corporations

WALKING PATH TRAVEL, LLC

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.

Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

Imelda Vasquez
Name of Person
Legalzoom.com, Inc.
Firm/Company
100 W. Broadway Suite 100
Address
Glendale, CA 91210
City/State and Zip Code
don@walkingpathtravel.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Imelda Vasquez

323

962-8600

Name of Contact 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:

S125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

S155.00 Filing Fee & Certified Copy

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 WALKING PATH TRAVEL, 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. The alternate name must include "Limited Liability Company," "L.L.C," or "L.L.C.") 2. California (Jurisdiction under the law of which foreign limited liability company is organized) 02/07/2012 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 2332 Caringa Way, Carlsbad, CA 92009 (Street Address of Principal Office) 6 2332 Caringa Way, Carlsbad, CA 92009 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Donald Johnson, AMBR, 2332 Caringa Way, Carlsbad, CA 92009 Dianne M. Johnson, AMBR, 2332 Caringa Way, Carlsbad, CA 92009 8. 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) Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document conditutes an affirmation under the penalties of perjury that the facts stated herein are true 1 am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a 817.155, F.S.)

Typed or printed name of signce

Donald Johnson

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.01 13 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavailable,	, the alternate to be used	d in the state of Florida is:	WEER IN
2. The name s		ddress of the registered agent and office are:	EEE. FLORID
·		(Name) ling Oaks Blvd., Suite A	eri en
	Tampa	EL 33688 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 605, Florida Statutes.

(Signature).

\$ 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 California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: WALKING PATH TRAVEL, LLC

FILE NUMBER: FORMATION DATE:

201205210158

TURMATION

02/07/2012

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No Information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 1, 2014.

DEBRA BOWENSecretary of State