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### **COVER LETTER**

TO:

Registration Section
Division of Corporations

### ENDLESS RESORT OPTIONS LLC

SUBJECT:

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:

TARA DOW

Name of Person

ENDLESS RESORT OPTIONS LLC

Firm/Company

104 BYPASS ROAD, STE. 100

Address

WILLIAMSBURG, VA 23185

City/State and Zip Code

TDOW@SALESERO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

## DIANEY ANDERSON

.,757

258-5858 EXT 36

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:

□ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

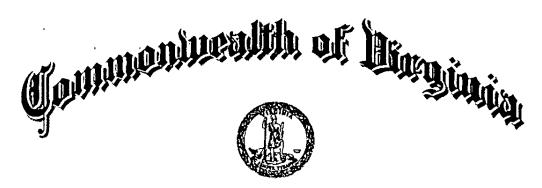
■ \$160.00 Filing Fee, Certificate of Status & Certified Copy

# 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. ENDLESS RESORT OPTIONSLLC	
(Name of Foreign Limited Liability Company; must includ	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of trail Liability Company," "L.L.C," or "LLC.")	nsacting business in Florida. The alternate name must include "Limited
<sub>2.</sub> VIRGINIA <sub>3</sub>	47-1107262
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. 11/1/2014	
(Date first transacted business in F (See sections 605.0904 & 605.0905, 1	lorida, if prior to registration.) F.S. to determine penalty liability)
5. 4646 W. IRLO BRONSON MEMO	
KISSIMMEE, FL 34746	
(Street Address of 104 BYPASS ROAD, STE. 100	of Principal Office)
WILLIAMSBURG, VA 23185	STATE TO THE STATE OF THE STATE
<u> </u>	Address)
7. The name, title or capacity and address of the person	<b>⇔</b>
TARA DOW, PRESIDENT 104 BYPASS ROA	a in
8. Attached is an original certificate of existence, no make having custody of records in the jurisdiction under the	
acceptable. If the certificate is in a foreign language, a	translation of the certificate under oath of the translator
must be submitted)	
	authorized person
(In accordance with section 605.0203, F.S., the execution of this document consti- am aware that any false information submitted in a document to the Department of	tutes an affirmation under the penalties of perjury that the facts stated herein are true. If State constitutes a third degree felony as provided for in s.817.155, F.S.)
TARA DOW	

Typed or printed name of signee



# STATE CORPORATION COMMISSION

Richmond, June 16, 2014

This is to certify that the certificate of organization of

**ENDLESS RESORT OPTIONS LLC** 

14 OCT 14 AM 10: 2
SECRETARY OF STATIL ANASSECTE OF

was this day issued and admitted to record in this office and that the said limited liability company is authorized to transact its business subject to all Virginia laws applicable to the company and its business. Effective date: June 16, 2014



State Corporation Commission Attest:

Clerk of the Commission

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 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.

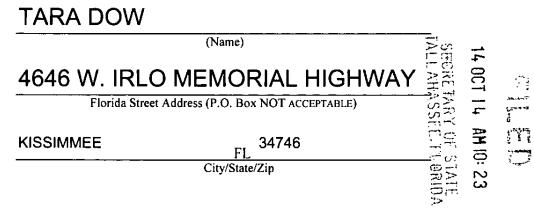
1. The name of the Limited Liability Company is:

### ENDLESS RESORT OPTIONS LLC

If unavailable, the alternate to be used in the state of Florida is:

### **ERO LLC**

2. The name and the Florida street address of the registered agent and office are:



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)