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D. SCOTT

JUN 1 2017

COVER LETTER

Registration Section

TO:

Division of Corporations			
SUBJECT: TravNow, 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:			
Robin Wolf			
Name of Person			
TravNow, LLC			
Firm/Company			
150 Governors Square, Suite E			
Address			
Peachtree City, GA 30269			
City/State and Zip Code			
Robin@accessrsi.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Robin Wolf Name of Contact Person Area Code Area Code Daytime Telephone Number			
Name of Contact Person Area Code Daytime Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 Name of Contact Person Area Code Daytime Telephone Number. STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the following amount: **Enclosed is a check for the following			

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. TravNow LLC (Name of Foreig	n Limited Liability Company; must include "Lin	nited 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 "LLC.")
2. GA		3. 38-3900197
(Jurisdiction under the law of	which foreign limited liability company is organized)	(FEI number, if applicable)
4. N/A		
	(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to dete	r to registration.) ermine penalty liability)
5. 150 Governors		_{6.} Same
(Street Address of Suite E	f Principal Office)	(Mailing Address)
Peachtree City,	GA 30269	
r cucha co ony,	<u> </u>	
7. Name and street addre	ess of Florida registered agent: (P.O. B	ox NOT acceptable)
	Swart Baumruk & Company	•
Name:		y, 220
Office Address:	1101 Miranda Lane	
	Kissimmee	, Florida 34741 (Zip code)
to comply with the provi		at as registered agent and agree to act in this capacity. I further ago oer and complete performance of my duties, and I am familiar with
	(Registered ager	tt's signature)
8. The name, title or cap <u>Title or Capacity:</u>	pacity and address of the person(s) who Name and Address:	has/have authority to manage is/are: Title or Capacity: Name and Address?
Manager	Robin Wolf	
<u></u>	150 Governors Square, Suite E	
	Peachtree City, GA 30269	No. of the Control of
	-	
		
(Use attachments if nece	essary)	
	v of which it is organized. (If the certific submitted)	d, duly authenticated by the official having custody of records in the cate is in a foreign language, a translation of the certificate under oat
	Signer	ture of an authorized person
10. This document is exe submitted in a document	cuted in accordance with section 605.05 to the Department of State constitutes a	203 (1) (b), Florida Statutes. I am aware that any false information third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

Control Number: 13384811

STATE OF GEORGIA

Secretary of State

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, the Sccretary of State of the State of Georgia, do hereby certify under the scal of my office that

TravNow LLC

a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number
Date Inc/Auth/Filed
Jurisdiction
Print Date
Form Number





Brian P. Kemp Secretary of State