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S. WARREN

OCT 0 5 2017

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 846295 7935675
HORIZATION:

AUTHORIZATION

COST LIMIT : \$ 155.00

ORDER DATE: October 3, 2017

ORDER TIME : 10:15 AM

ORDER NO. : 846295-015

CUSTOMER NO: 7935675

FOREIGN FILINGS

NAME: MAGIC TRAVEL, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY _____ PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: ____

COVER LETTER

TO:

Registration Section

Di	vision of Corporation	S						
CUDICAT.	Magic Travel, L.L.C							
SUBJECT:		Name of Limited Liability Company						
The enclose Existence, a	d "Application by For and check are submitted	eign Limited Liability Compa I to register the above referen	any for Authorizat need foreign limite	ion to Trai ed liability	nsact Business in Florida," (company to transact busine	Certificate of ss in Florida.		
Please retur	n all correspondence c	oncerning this matter to the f	ollowing:					
	Kevin Johnson							
		Name of Person						
	K&L Gates LLP							
Firm/Company								
	1 Lincoln Stree							
	 ,	Address						
	Boston, MA 02111							
		City/St	ate and Zip Code					
	kevin.johnson@l	~						
		E-mail address: (to be used	for future annual	report not	ification)			
For further	information concerning	g this matter, please call:						
К	evin Johnson		617 at (951-904				
	Name o	f Contact Person	Area Code	Day	time Telephone Number			
Di Re P.	AILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	ADDRESS: of Corporations ion Section uilding cutive Center Circle ee, FL 32301			
	a check for the follow \$125.00 Filing Fee	ing amount: \$\Bigcup \\$130.00 \text{Filing Fee & Certificate of Status}\$	■ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Ce of Status & Certified Cop			

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

IN COMPILANCE WITH SECTION (6/5/05)2, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO PEGISTER A FOREIGN, LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA L. Magic Travel, L.L.C (Name of Foreign Limited Liability Company, must include "Limited Liability Company" "L.L.C., or "LLC") It came onscallables refer alternate name adopted for the purpose of transacting business in Planta. The electronic name must include "Limited Liabidity Company," ILLC," or "LLC." or "LL 2. Delaware (III number, it applicable) (furnifiction under the law of which foreign limited frankly company is ingantized) Upon filing (Date that banshered becomes in Florida, if poor to registration) (See rection 605 090) & 605 0905, F.S. to determine penalty hability) 5330 Warrior Lane, Suite A 5330 Warriot Lane, Suite A (Mailing Address) (Street Address of Principal Office) Kissimmee, FL 14746 Rissimmee, FL 34746 7. Name and street address of Florida registered agent: (P.O. Box. NOFF acceptable) Rich Sun Name: 5330 Warrior Lane, Suite A Office Address: ത് Kissimmee 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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positionas fegistered agent (Hegisteren agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity: Name and Addiess: Title or Capacity: See Exhibit A (Use attachments if necessary) 9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under outh of the translator must be submitted? 10. This document is executed in accordance with section 605,0203 (1) (b), Florida Statutes, 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 \$.817.155, F.S. Rich Sun Typed or preved name of signer

Exhibit A

Magic Travel, L.L.C. - Managers

Name	Address			
Rich Sun	5330 Warrior Lane, Suite A Kissimmee, FL 34746			
Yuanrenrang Song	5330 Warrior Lane, Suite A Kissimmee, FL 34746			
Qingsong Zhang	5330 Warrior Lane, Suite A Kissimmee, FL 34746			
Mei Kwan Fan	5330 Warrior Lane, Suite A Kissimmee, FL 34746			
Fen Qin	5330 Warrior Lane, Suite A Kissimmee, FL 34746			

17 OCT -L AM 8: 50

Page 1



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

DELAWARE, DO HEREBY CERTIFY "MAGIC TRAVEL, L.L.C." 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 THIRD DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MAGIC TRAVEL, L.L.C." WAS FORMED ON THE SEVENTEENTH DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 203332985

Date: 10-03-17

6185492 8300 SR# 20176450270