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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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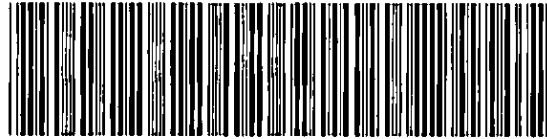
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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[Handwritten signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Anthony Travel, 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:

Maggie Frantz
Name of Person

Anthony Travel, LLC
Firm/Company

7920 Belt Line Rd, Ste 1010
Address

Dallas, TX 75254
City/State and Zip Code

maggiefrantz@anthony-travel.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maggie Frantz at (214) 234-3838
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:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy | <input type="checkbox"/> \$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 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Anthony 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 "LLC.")

2. Delaware 3. 81-1238354
(Jurisdiction under the law of which foreign limited liability company is organized) (F.I. number, if applicable)

4. 2/5/16
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.004 & 605.005, F.S. to determine penalty liability.)

5. 7920 Belt Line Road 6. 7920 Belt Line Rd
(Street Address of Principal Office) (Mailing Address)
Suite 1010
Dallas, TX 75254

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Tammie Manbeck
Office Address: 4000 Central Florida Blvd.
Orlando, Florida 32816
(City) (Zip code)

Registered agent's acceptance:

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 position as registered agent.

Tammie Manbeck
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
<u>President/CFO.</u>	<u>John Anthony</u> <u>1404 Ivy Court</u> <u>South Bend, IN 46637</u>	<u>SVP</u>	<u>Patrick Walsh</u> <u>1404 Ivy Court</u> <u>South Bend, IN 46637</u>
<u>Treasurer</u>	<u>Katie Anthony</u> <u>1404 Ivy Court</u> <u>South Bend, IN 46637</u>	<u>SVP/CFO</u>	<u>Margaret Frantz</u> <u>7920 Belt Line Rd Ste 1010</u> <u>Dallas, TX 75254</u>

(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 oath 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 s.817.155, F.S.

Margaret Frantz
(Signature of an authorized person)
Margaret Frantz
(Typed or printed name of signer)

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CLERK OF CIRCUIT COURT
JANICE L. DODD

Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ANTHONY TRAVEL, 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 SIXTEENTH DAY OF NOVEMBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ANTHONY TRAVEL, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF JANUARY, A.D. 2016.

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

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DELAWARE SECRETARY OF STATE




Jeffrey W. Bullock, Secretary of State

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SR# 20176846551

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

Authentication: 203585881

Date: 11-16-17