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Capitol Office Center 3422 Old Capitol Trail, Suite 700 Wilmington, DE 19808-6192 (USA)

Tel: 302.996.5819 Fax: 302.996.5818 Toll Free (USA & Canada, only): Tel: 1.800.423.2993

Fax: 1.800.423.0423 E-mail: inc\_info@delbusinc.com Internet: http://www.delbusinc.com



□ Delaware incorporation and Limited Liability Company (LLC) formation X

- ☐ Shelf corporations always available
- ☐ Delaware Registered Agent service
- Marine incorporations
- ☐ Aircraft incorporations
- ☐ "Legal Office Address in Delaware, USA Package" (mailing address, remailing, forwarding, private Delaware phone number, fax & answering service)
- ☐ Office space for lease

February 3, 1998

Ms. Brenda Tadlock Florida Secretary of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

HOLIDAY CONSULTING GROUP, LLC RE:

File #: 8117

Dear Secretary of State:

Please find enclosed the following documents:

900002432839--6: -02/17/98--01052--015 \*\*\*\*285.00 \*\*\*\*285.00

- 1) Application to register a foreign corporation
- 2) Filing Fee payment, and
- 3) State of Delaware original document.

Please return the authorization certificate or any other documents to:

> Delaware Business Incorporators, Inc. 3422 Old Capitol Trail, Suite 700 Wilmington, DE 19808-6192

your prompt response to our request.

Sincerel

Mallabille Louis Mt.

Examiner

Enclosure Decater Upda er Verifyer.

Acknowledgeme

W. P. Verityer

C COPY R. AGENT TOTAL BALANCE DUE \$ REFUND \$ .

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

C." if not so contained in the name at pre-	nust end with the sent)	words "limited company" or their abbre	viation FCR
DELAWARE		9-348026-2	SSH I
risdiction under the law of which foreign impany is organized)	limited liability	(FEI number, if applicable)	R.F.
DECEMBER 3, 1997	<u> </u>	PERPETUAL	LOR
(Date of Organization)	(D) ceas	uration: Year limited liability company se to exist or "perpetual")	y will Sm
UPON AUTHORIZATION			
(Date first transacted business	in Florida. (See s	ections 608.501, 608.502, and 817.155	, F.S.)
101 SOUTHHALL LANE, SUITE 40	0		
MAITLAND, FL 32751			<del></del> ·
THATTEMIND, EF 34/3T			
EMILLEMND, FL 32/31	(Street address o	f principal office)	· ·
name, title, and business address of l manage the foreign limited liability NAME & ADDRESS:	f each managin	g member[MGRM] or manager[]	
name, title, and business address of limited liabili	f each managin ty company in	g member[MGRM] or manager[] Florida: (attach additional page in	f necessary)
name, title, and business address of l manage the foreign limited liability NAME & ADDRESS:	f each managin ty company in TITLE:	g member[MGRM] or manager[l Florida: (attach additional page it NAME & ADDRESS:	f necessary)  TITLE:

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

		SECRETARY OF FALLAHASSEE, F	98 FEB 12 P	
The undersigned member or authorized representativ	e of a member of			
HOLIDAY CONSULTING GROUP, LLC	deposes and says:	TATE	=======================================	
<ol> <li>the above named limited liability company has at lead</li> <li>the total amount of cash contributed by the member</li> </ol>				
3) if any, the agreed value of property other than cash \$ A description of the prop	h contributed by member(s erty is attached and made	i) is a par	t here	eto.
4) the total amount of cash or property anticipated to \$ 15,000 . This total includes amounts from the cash or property anticipated to	be contributed by membe om 2 and 3 above.	r(s) is		

Signature of a member or authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Fee: \$ 52.50 for Affidavit

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the limited liability company is: HOLIDAY CONSULTING GROUP, LLC		ထ	
		ECRE	<del>-</del> п	
2.	2. The name and address of the registered agent and office is:  RICHARD F. JOHNSON		B 12 PM 1: 18	
	(Name)			
	101 SOUTHHALL LANE, SUITE 400			
	(P.O. Box or Mail Drop Box NOT acceptable)			
	MAITLAND, FL 32751			
	(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.

Signature)

(Date)

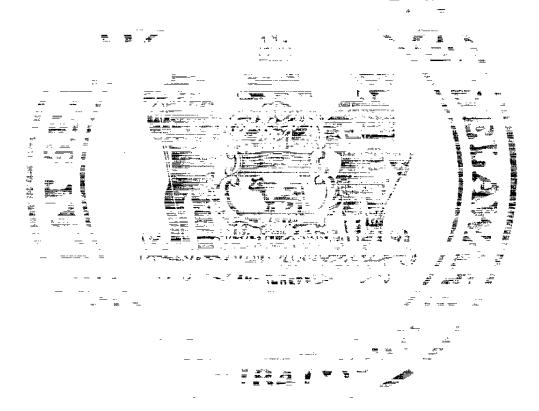
Filing Fee: \$ 35 for Designation of Registered Agent

#### State of Delaware

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#### Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "HOLIDAY CONSULTING GROUP, 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 THIRD DAY OF FEBRUARY, A.D. 1998.



Edward J. Freel, Secretary of State

8898982

AUTHENTICATION:

02-03-98

2827754 8300

981042029

DATE: