

# 2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M04000000199

Entity Name: SELLMYTIMESHARENOW, LLC

FILED  
Jun 13, 2007  
Secretary of State

**Current Principal Place of Business:**

251 MAITLAND AVENUE, STE. #315  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

251 MAITLAND AVENUE, STE. #315  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number: 37-1471683

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

REIN, LUCINDA  
251 MAITLAND AVENUE, STE. #315  
ALTAMONTE SPRINGS, FL 32701 US

**Name and Address of New Registered Agent:**

GONZALEZ, LUCINDA A  
251 MAITLAND AVENUE, STE. #315  
ALTAMONTE SPRINGS, FL 32701 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LUCINDA A. GOLZALEZ

06/13/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO ( ) Delete  
Name: TRENBLAY, JASON  
Address: 3 MAGARET LANE  
City-St-Zip: LEE, NH 03824

Title: P ( ) Delete  
Name: ELDRIDGE, MARK  
Address: 11 MERRILL DR C5  
City-St-Zip: HAMPTON, NH 03842

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: ELDRIDGE, MARK  
Address: 383 CENTRAL AVE, STE. 260  
City-St-Zip: DOVER, NH 03820

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JASON TREMBLAY

CEO

06/13/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date