

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood,
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 30 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. DOCUMENT # L02000002750
Name and Mailing Address

0016009 01 MB 0.309 **AUTO T9 0 0615 32413-443207



LUXURY VACATION RENTALS, L.L.C.
19907 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32413-4432



CR2EQ84 (7/03)

2. New Mailing Address

City, State, Zip

Principal Place of Business

19907 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32413

3. New Principal Place of Business Address

City, State, Zip

4. State/Country of Formation

FL

5. Date Organized or Qualified
To Do Business in Florida

02/05/2002

6. FEI Number

EIN
45-0465258

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☒

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

~~GIOIELLO, JOHN L~~
19907 FRONT BEACH ROAD
PANAMA CITY BEACH FL 32413

9. Name and Address of New Registered Agent

Name

Woodie S. McCarty

Street Address (P.O. Box Number is Not Acceptable)

19907 FRONT BEACH RD

PANAMA CITY BEACH

City

FL

Zip Code

32413

10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Woodie S. McCarty

REGISTERED AGENT MUST SIGN

Date

10/27/03

11. Names and Street Addresses of Each Managing Member/Manager

Title(s)	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM MEMBER	JUDITH A. McCARTY	19907 FRONT BEACH RD PANAMA CITY BEACH, FL 32413	PANAMA CITY BEACH, FL 32413
MGRM MEMBER	Woodie S. McCARTY	19907 FRONT BEACH RD	PANAMA CITY BEACH, FL 32413

REINSTATEMENT

03
dec

500024294345
10/30/03--01058--020 **\$5.00

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

Woodie S. McCarty

Date

10/27/03

Daytime Phone #

850-236-3690

Typed or printed name of signing Managing Member/Manager

Woodie McCARTY

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October 27, 2003

Florida Department of State
Division of Corporations
Registration Section
PO BOX 6327
Tallahassee, FL 32314-6327

Dear Sirs:

I received in the US Mail on 10/27/03 the enclosed Florida Department of State Certificate of Administrative Dissolution or Revocation form. I had never received any prior notices (two or otherwise) regarding filing the 2003 uniform business report. On the form I have changed the name of the Current Registered Agent from John L. Gioiello who does not receive mail at 19907 Front Beach RD to myself, Woodie S. McCarty, who does receive mail at 19907 Front Beach RD. Hopefully this will correct any future communication errors. Please see the enclosed completed form plus check for \$55 including \$50 for Annual Report Fee plus an additional \$5 for a current Certificate of Status.

Sincerely,


Woodie McCarty, Member
Luxury Vacation Rentals, LLC
19907 Front Beach, RD
Panama City Beach, FL 32413