

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L05000053838

**FILED**  
**Dec 06, 2011**  
**Secretary of State**

**Entity Name:** WELLINGTON VACATIONS, LLC

**Current Principal Place of Business:**

1930 HARRISON STREET  
SUITE 603  
HOLLYWOOD, FL 33020 US

**New Principal Place of Business:**

1930 HARRISON STREET  
SUITE 503  
HOLLYWOOD, FL 33020 US

**Current Mailing Address:**

1930 HARRISON STREET  
SUITE 603  
HOLLYWOOD, FL 33020 US

**New Mailing Address:**

1930 HARRISON STREET  
SUITE 503  
HOLLYWOOD, FL 33020 US

**FEI Number:** 20-1932715

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CITRINE MANAGEMENT SERVICES, INC.  
2706 NE 32ND AVE.  
SUITE 3  
FORT LAUDERDALE, FL 33308 US

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

CITRINE MANAGEMENT SERVICES, INC.  
18851 NE 29TH AVE  
SUITE 1005  
AVENTURA, FL 33180 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: CITRINE MANAGEMENT SERVICES, INC.

12/06/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CITRINE MANAGEMENT SERVICES INC.  
Address: 18851 NEW 29TH AVE, #1005  
City-St-Zip: AVENTURA, FL 33180 US

I hereby 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: CITRINE MANAGEMENT SERVICES, INC.

MGR

12/06/2011

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