

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000050494

Entity Name: BSW VACATIONS, LLC

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3971 WILD LIME LANE  
CORAL SPRINGS, FL 33065 US

**New Principal Place of Business:**

**Current Mailing Address:**

3971 WILD LIME LANE  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

FEI Number: 26-2654588      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

WOODS, BENJAMIN  
3971 WILD LIME LANE  
CORAL SPRINGS, FL 33065 US

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

WOOD, BENJAMIN  
3971 WILD LIME LANE  
CORAL SPRINGS, FL 33065 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: BENJAMIN WOOD

01/13/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WOOD, BENJAMIN  
Address: 3971 WILD LIME LANE  
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: MGRM  
Name: WOOD, SUZETTE  
Address: 3971 WILD LIME LANE  
City-St-Zip: CORAL SPRINGS, FL 33065 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: BENJAMIN WOOD

MGRM

01/13/2010

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