

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000072093

Entity Name: BVR PROGRAM, LLC

**FILED**  
**Jun 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8869 COBBLESTONE DRIVE  
SUITE 202  
SOUTHAVEN, MS 38671 US

**Current Mailing Address:**

P.O. BOX 165  
SOUTHAVEN, MS 38671 US

**New Principal Place of Business:**

6928 COBBLESTONE DRIVE  
SUITE 202  
SOUTHAVEN, MS 38672 US

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MATTHEWS, DANA C  
MATTHEWS & HAWKINS, P.A.  
4475 LEGENDARY DRIVE  
DESTIN, FL 32541 US

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

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: DANA MATTHEWS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MULLINS, HAL S  
Address: P.O. BOX 165  
City-St-Zip: SOUTHAVEN, MS 38671 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: HAL S MULLINS

MGRM

06/14/2011

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