

2013 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000108241

FILED
Dec 10, 2013
Secretary of State

Entity Name: CARIBBEAN VILLA VACATION, LLC

Current Principal Place of Business:

116 HILLCREST DR
DAVENPORT, FL 33897

New Principal Place of Business:

Current Mailing Address:

116 HILLCREST DR
DAVENPORT, FL 33897

New Mailing Address:

FEI Number: 20-3305397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALLEN, COSMAS
116 HILLCREST DR
DAVENPORT, FL 33897 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: COSMAS ALLEN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: COSMAS AUGUSTUS ALLEN
Address: 116 HILLCREST DR
City-St-Zip: DAVENPORT, FL 33897 PK

Title: MGR
Name: ALLEN, GINA
Address: 116 HILLCREST DR
City-St-Zip: DAVENPORT, FL 33897 PK

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: COSMAS ALLEN

MGRM

12/10/2013

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