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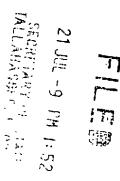
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Reina Vaca Hons LLC Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Randall Rena	
Name of Person	
Firm/Company	
10163 Shallow Water DR Address	
Winter Goodon FL 34787 City/State and Zip Code	
ACE 2	
E-mail address: (to be used for future annual report notification)  or further information concerning this matter, please call:	
RiSina at 407, $319-8183$	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
S125.00 Filing Fee Status Certificate of Sta	
Mailing AddressStreet AddressNew Filing SectionNew Filing Section DivisionDivision of CorporationsThe Centre of Tallahassee	
P.O. Box 6327 2415 N. Monroe Street, Suite 810	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Reina Vacations LC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
10163 Shalky Water DR 10163 Shallow Water DR Winter Graden, FL 34787 Winter Graden, FL 34787
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Randall Reina
Florida street address (P.O. Box NOT acceptable)
Winter Garden FL 34787
City State Zip  Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacities of further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.  Registrated Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
M6l	- Ramall Relno 1963 Shallow Water DR Winter Gooden FL 34787
AMBQ	SANTIAGO Reina LO163 Shalkow Water PR Winter Garden, EL 34787
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be see that of filing.)  Note: If the date inserted in this block does not	ate of filing:
ARTICLE V: Effective date, if other than the date if an effective date is listed, the date must be she date of filing.)  Note: If the date inserted in this block does not he document's effective date on the Department.	specific and cannot be more than five business days prior to or 90 days after t meet the applicable statutory filing requirements, this date will not be fiscal as
RETICLE V: Effective date, if other than the date of filing.) Note: If the date inserted in this block does not he document's effective date on the Department of the VI: Other provisions, if any.  NOTE: REGULTED SIGNATURE:	t meet the applicable statutory filing requirements, this date will not be listed as nt of State's records.
ARTICLE V: Effective date, if other than the da If an effective date is listed, the date must be s the date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department ARTICLE VI: Other provisions, if any. Alone  REQUIRED SIGNATURE:  Signature of an This document is exect Lam aware that any fal	specific and cannot be more than five business days prior to or 90 days after t meet the applicable statutory filing requirements, this date will not be fiscal as

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV.