PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 NOV -7 PM 1:19

LIMITED LIABILITY COMPANY REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M02000003461

1. Limited Liability Company's Name
SUNTERRA COMMUNICATIONS, LLC

2. Principal Office Address		**3.** Mailing Office Address	
3865 W. Cheyenne Ave		3865 W. Cheyenne Ave	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: North Las Vegas, NV		City & State: North Las Vegas, NV	
Zip: 89032	Country: USA	Zip: 89032	Country: USA

4. State/Country of Formation: Delaware

5. Date Organized or Qualified To Do Business in Florida: 12/26/02

6. FEI Number: 33-1014918 ☐ Applied For ☐ Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☑ $5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: CT CORPORATION SYSTEM

200024498822
11/07/03--01003--015 **155.00

Street Address (P.O. Box Number is Not Acceptable): 1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, Etc.:

City: PLANTATION | State: FL | Zip Code: 33324

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent: D J Farber DAVID T. FARBER ASSISTANT SECRETARY Date: 11/3/03

REGISTERED AGENT MUST SIGN

CR2E041 (10/02)

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGR	Sunterra Management & Exchange		
	Holding Company	3865 W. Cheyenne Ave	North Las Vegas, NV 89032

REINSTATEMENT 03 cus dcc

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of Managing Member/Manager: Frederick C Bauman Date: 10/22/2003 Daytime Phone #: (702) 304-7092

Typed or printed name of signing Managing Member/Manager: Frederick C. Bauman, Vice President of Sole Manager