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To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : CSH SERVICES, LLC
Account Number : I20070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

FLORIDA/FOREIGN LIMITED LIABILITY CO.

MYVACATIONS SAVERS LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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EXAMINER

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TALLAHASSEE, FLORIDA

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2009 AUG 24 AM 8:34
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TALLAHASSEE, FLORIDA

41-090001877673

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. MYVACATIONS SAVERS LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. NEVADA

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 27-0706799

(FEI number, if applicable)

4. 7/9/2009

(Date of Organization)

5. PERPETUAL

(Duration: Year limited liability company will cease exist or "perpetual")

6. UPON QUALIFICATION

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 4631 NW 31ST AVENUE, STE 132

FORT LAUDERDALE, FLORIDA 33309

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

ARAGON INC., 4631 NW 31ST AVE, STE 132, FORT LAUDERDALE, FL 33309

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: ANY ACTIVITY OR

BUSINESS PERMITTED UNDER THE LAWS OF THE STATE OF FLORIDA

Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Darryl Hicks

Typed or printed name of signee

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2009 AUG 24 AM 18:34
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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

MYVACATIONS SAVERS LLC

If name unavailable, the alternate name to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

A1A REGISTERED AGENT INC.

(Name)

5647 110TH AVENUE NORTH

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

ROYAL PALM BEACH

FL

33411

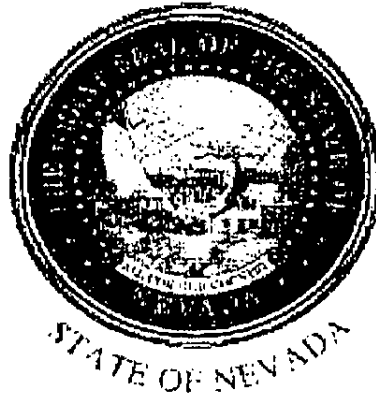
City/State/Zip

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 capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Ima Make Tuta MAKE PCEs 8/24/09
(Signature)

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TALLAHASSEE, FLORIDA

09000187767-3.
SECRETARY OF STATE**CERTIFICATE OF EXISTENCE
WITH STATUS IN GOOD STANDING**

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **MYVACATIONS SAVERS LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since July 9, 2009, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 24, 2009.



[Signature]
ROSS MILLER
Secretary of State

Electronic Certificate
Certificate Number: C20090824-0477
You may verify this electronic certificate
online at <http://www.nvsos.gov/>

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TALLAHASSEE, FLORIDA

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