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C. LEWIS

APR 2 7 2010

EXAMINER

CÖVER LETTER

Registration Section

TO:

Division of Corporations
SUBJECT: Beach Club ReSOFT Vacations, UC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Tamar Stern Name of Person
Beach Clob Resort Vacahors, UC
* 195 Mogan Farm Dr Address
Ottology, GA 30342 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certified Copy of Status & Certified Copy

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

	IN COMPLIANCE WITH SECTION 608.505, PIDRIDA STATUTES, THE POLITIONING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
	1. Beach Clib Resoft Vacations LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
	(Name of Poreign Limited Liability Company, must include Limited Liability Company, L.E.C., of 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. Seorgia X 3.
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
*	4. 5 OS (Date of Organization) 5. (Duration: Year limited liability company will cease to exist or "perpetual")
	6. Date first transacted business in Florida, if prior to registration.)
	7. (See sections 608.501 & 608.502 F.S. to determine penalty liability)
/_	1 Tologan tam Jon
	(Street Address of Principal Office)
+	8. If limited liability company is a manager-managed company, check here
Y	9. The name and usual business addresses of the managing members or managers are as follows:
	Tamar Stem
	195 Moran Famor
	Atlan, GA 30342 (
	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:
	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.)

Typed or printed name of signee

Ø002/002 Pase:2/2

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:
	Beach Club Resort Vacations, LLC
L	If unavailable, the alternate to be used in the state of Florida is: (Legal Zoom-) United States Corporation South, Jack
X	2. The name and the Florida street address of the registered agent and office are:
	United States Grocana Agents, INC.
	13302 Winding Oak Blud So He A, Tango, F Florida Street Address (P.O. BOX NOT ACCEPTABLE)
	Tampa 17. 33688

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.

(Signsture)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

FILED
2010 APR 26 PM 3: 46
SECRETARY OF STATE
SECRETARY OF STATE

STATE OF GEORGIA

Secretary of State

Corporations Division 315 West Tower #2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Brian P. Kemp, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

BEACH CLUB RESORT VACATIONS, LLC

Domestic Limited Liability Company

was formed or was authorized to transact business on 05/21/2008 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 11th day of March, 2010

B: Ph

Brian P. Kemp Secretary of State

Certification Number: 5326490-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp