2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 26, 2014
Secretary of State
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Entity Name: SUNSET REFLECTIONS VACATION RENTALS LLC

Current Principal Place of Business:

1147 CAPE SAN BLAS RD
PORT ST. JOE, FL 32456

Current Mailing Address:

1147 CAPE SAN BLAS RD
PORT ST. JOE, FL 32456

FEI Number: 26-2636439

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COSTIN AND COSTIN
413 WILLIAMS AVE
PORT ST. JOE, FL 32456 US

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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	ANDERSON, ANNE	Name	ANDERSON, REX
Address	1075 CAPE SAN BLAS RD	Address	1075 CAPE SAN BLAS RD
City-State-Zip:	PORT ST. JOE FL 32456	City-State-Zip:	PORT ST. JOE FL 32456

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REX ANDERSON MGRM 02/26/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date