

Document Number

A97000002864

C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 (850)222-1092

City

State

Zip

Phone

300003362693--5

-08/18/00--01046--009

****105.00 *****35.00

CORPORATION(S) NAME

Vistana WGV Management, Ltd.

00 AUG 18 PM 1:28

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

☐ Profit

☐ NonProfit

☐ Limited Liability Company

☐ Foreign

☐ Amendment

☐ Dissolution/Withdrawal

☐ Merger

☐ Mark

☐ Limited Partnership

☐ Reinstatement

☐ Limited Liability Partnership

☐ Certified Copy

☐ Annual Report

☐ Reservation

☐ Photo Copies

☐ Other

☒ Change of R.A.

☐ Fictitious Name

☐ CUS

☐ Call When Ready

☒ Walk In

☐ Mail Out

☐ Call if Problem

☐ Will Wait

☐ After 4:30

☒ Pick Up

Name
Availability

Document
Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier

8/18

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THANKS

CONNIE BRYAN

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00 AUG 18 AM 11:26

CR2E031 (1-89)

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership organized under the laws of the state of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Vistana WGV Management, Ltd.

Name of the limited partnership

2. 12-26-97

Date of filing/registration in Florida

3. A97000002864

Document number assigned

4. The name and address of the present registered agent and office:

Corporation Service Company

1201 Hays Street

Tallahassee FL 32301-2525

5. The name and street address of the successor registered agent and office: (P.O. Box not acceptable)

CT Corporation System

1200 S. Pine Island Road

Plantation, FL 33324

Such change was authorized by the general partners.

Vistana WGV Management, Inc., as sole general partner
of Vistana WGV Management, Ltd.

BY: *Peter F. Souza*

Signature of General Partner

8-9-00
Date

Having been named as registered agent and to accept service of process for the above stated limited partnership 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

PETER F. SOUZA
ASSISTANT SECRETARY

Registered Agent signature

8/16/00
Date

Filing Fee: \$35.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHSE004(3/95)