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VUISION OF CORPORATIO

TO:

Account Name	:	CORPORATE	<b>CREATIONS</b>	INTERNATIONAL	INC.
Account Number	2	110432003	53		
Phone .	t	(561)694-8	3107		
Fax Number	1	(561)694-2	1639		
					•

## **REGISTERED AGENT CHANGE**

## VACATION WHOLESALER, INC.

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of section 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1.	The name of	f the cor	poration is	s: Vacation	Wholesaler,	Inc.

2. The principal office address: C/O CLUB MED 75 VALENCIA AVENUE

CORAL GABLES FL 33134

3. The mailing address (if different): \_

<b></b>						
4. Date of incor	poration/qualification:	1/24/2003	Document Number:	F03000000359		
5. The name and		rent registered a	gent and registered office	on file with the S	n7 JI	
	1201 HAYS STREET			<u> </u>	JUN F.	
	TALLAHASSEE FL 32301	L		AS	25 FIL	
6. The name and (if changed):	• •	่ ก็ควาง∎ี่	it (if changed) and /or regi	istered office	PH	• ·
	Corporate Creations No			F.v.	N	- :
	11380 Prosperity Farms			<u>97</u>	- <u>- 1</u>	<b>.</b>
	Palm Beach Gardens Fl	Box Not acceptable) L 33410		10m	en iza	
The street addr agent, as change	ess of its registered officed will be identical.	ce and the street	address of the business of		laar on saleen sie. Gebruikt op sie die seel	
authorized by th	e board, or the corporatio	n has been notifi	d by its board of directo ied in writing of the chang	rs or by an officer so ge. at tweet	بالريث فالمحاصين	
1	Alain Posts	LC, Director	by Y.Huberdeau as attorney-in (Printed or Typed na	-fact ime and title)	ng ng kang ng n	
I further agree performance of agent. Or, if th	to comply with the promy duties, and I am famil	ovisions of all liar with and acc d merely to refle	agree to act in this capaci statutes relative to the p cept the obligation of my p act a change in the registe writing of this change.	roper and complete osition as registered	19 1 N 10	• .

Var≬t (Signature

6/25/2007 (Date)

If signing on behalf of an entity:

Valerie Hawk, Asst. Secretary

(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

Corporate Creations International Inc. 11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107

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