

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
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SEGREDARY OF STATE

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 24, 2018

Order#: 202326-077

Re: HTS-COCONUT POINT, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporation	organized under the laws of the State of Delaware registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: HTS-COCONUT	POINT, INC.	
2. The principal	office address: 6262 Sunset Drive	e, Miami, FL 33143	
3. The mailing a Orlando, F		ature Experiences, Inc., Legal Dept., 9002 San Marco Court,	
4. Date of incorp	poration/qualification: 11/13/1998	Document number: F98000006260	
	street address of the current regis tment of State: (If resigned, enter i	tered agent and registered office on file with the resigned)	
	Corporate Creations Network Inc	.	
	11380 Prosperity Farms Road, #221E		
	Palm Beach Gardens	FL 33410	
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registated office	
	Corporation Service Company	35E 29	
	1201 Hays Street		
	P.O B	ox NOT acceptable PL 32301 Tr	
The street addre	ss of its registered office and the	street address of the business office of its registered agent.	
authorized by th	is authorized by resolution duty ac the board, or the corporation has be	dopted by its board of directors or by an officer so een notified in writing of the change.	
	<u> </u>	Jill Cilmi, Vice President	
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm	o comply with the provisions of a my duties, and I am familiar with	Printed or typed name and title ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of mv position as registered to reflect a change in the registered office address, I ified in writing of this change.	
By: Ce	in led	05/23/2018	
	latine of Registered Agent	Date	
	half of an entity:		
	Asst. Vice President		

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

* * * FILING FEE: \$35.00 * * *