## H78625

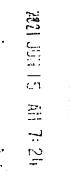
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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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: Meghan Groom meghan.groom@cscglobal.com

Date: June 14, 2021

Order#: 847727/359

Re: VACATION BREAK U.S.A., INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$\$35.00.

Please take the following action:

XX\_\_\_ File in your office on a routine basis.

XX Issue Proof of Filing.

XX \_\_ Return Regular Mail in the enclosed envelope.

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

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

INCA.XCOA

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

statement of cha	nge is submitted for a corporation org	2502, 607.1508, or 617.1508, Florida Statutes ganized under the laws of the State of FL	
in orde	r to change its registered office or reg	istered agent, or both, in the State of Florida.	
1. The name of t	he corporation: VACATION BREAK L	J.S.A., INC.	
	office address:BOR DR ORLANDO, FL 32821		
3. The mailing a	ddress (if different):		
4. Date of incom	poration/qualification: 10/01/1985	Document number: H78625	
	street address of the current registere tment of State: (If resigned, enter resigned)	d agent and registered office on file with the gned)	
	CORPORATE CREATIONS NETW	ORK INC.	ينين سا
	801 US HIGHWAY 1		5
	NORTH PALM BEACH, FL 33408	•	至
6. The name and (if changed):	l street address of the new registered a	gent (if changed) and /or registered office	· 12
	Corporation Service Company		
	1201 Hays Street		
P.O Box NOT acceptable			
	Tallahassee	FL 32301	
The street addre	ess of its registered office and the stre be identical.	eet address of the business office of its regis	tered agent,
Such change was authorized by th	as authorized by resolution duly adopte board, or the corporation has been	nted by its board of directors or by an officen notified in writing of the change.	· so
X is	LE agui	Jiff Cilmi, Vice President	
/ 1	re of an officer or director	Printed or typed name and title	
I further agree to of my duties, and document is being corporation has	the appointment as registered agent to comply with the provisions of all s d I am familiar with and accept the c ng filed merely to reflect a change in s been notified in writing of this chan s Service Company	tatutes relative to the proper and complete pobligation of my position as registered agen to the registered office address, I hereby conf	performance t. Or, if this irm that the
Ву:	Tokuhla	06/10/2021	<u> </u>
If signing on be	half of an entity:	Date	
	Asst. Vice President		
T	yped or Printed Name		

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