101000011913

(Requestor's Name)					
(Address)					
(Address)					
(Addless)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entry Name)					
(Document Number)					
Certified Copies Certificates of Status					
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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: Ami Casper ami.casper@cscglobal.com

Date: May 24, 2018

Order#: 202326/153

Re: INTERVAL SOFTWARE SERVICES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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:Ami Casper

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

ATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Push to a provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits to following statement in order to change its registered office or registered agent, or both, in the State of Florida

1. 1	Name of the limited liability company: INTERVAL SC	FTWARE SE	ERVICES, LLC		
7 (a) 6262 Sunset Drive	(b)			
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*)	Mailing address	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Miami, FL 33143				
	07/19/2001	L.	01000011913		
3.	Date of filing/registration in Florida	4.	Document n	umber	
5. (a)	Registered Agent and Registered Office shown on the records o	f the Florida De	pt. of State:		
	11380 Prosperity Farms Road, #221E Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)			
	Palm Beach Gardens . F	L33410		20 15	
	Corporation Service Company				
	Enter name of NEW Registered Agent and/or NEW Registere	<u>s</u> :	HAY 29		
	1201 Hays Street			29 PH	
	NEW Registered Office Address:			1 4: 29 S.A.C. T. GRIDO	
	Tallahassee F	L_32301		. •	
the clagent was/v	limited liability company is not organized under the la hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lawere authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	of the register liability comp of the limited e limited liab	ed office and the busi pany, it is hereby conf d liability company or	iness office of the registered irmed that the change(s)	
Signature of a member or authorized representative of a member			Printed or typed name of signee		
provi the o to me	reby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide arely reflect a change in the registered office address, le ed in writing of this change.	e performanc	e of my duties, and L	am familiar with and accept	
Signa	Jure of Registered Agent Corporation Service Company	RV: Ami	M Casper Asst V	ice President	