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PICK-UP	WAIT	MAIL				
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: March 25, 2015

Order#: 540425/007

Re: CHARLOTTE RESORT 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:Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 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 LIMITED LIABILITY COMPANY

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

2. (a)	7995 Mahogany Run Lane		(b)	7995	7995 Mahogany Run Lane		
``	Principal office address of l (Note: MUST BE ST	• • •			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Naples	FL 34113		Naples,	FL 34113		
	01/13/2006			L060000	005045		
3.	Date of filing/registr	ation in Florida	4.		Document number		
5. (a)	William G. Morris						
()	Registered Agent and Registered O	ffice shown on the records	of the Florida	Dept. of Sta	nte:		
	247 N COLLIER BLVD, Sui	ite 202					
	Registered Office Address (MU	ST BE FLORIDA STREE	T ADDRESS)				
	Marco Island	, 1	FL <u>34145</u>		15 MAR		
(b)	Corporation Service Compa	ınv			№ ₩		
(0)	Enter name of NEW Registered A		red Office add	ress:	_ 7 or P		
	1201 Hays Street				- 2: 5 -		
	NEW Registered Office Address:				-		
	Tallahassee		FL 32301				
	Talialiassec .		FL_32301				
the cha agent was/w	ange or changes are made, the will be identical. Or, in the ca	Florida street address se of a Florida limited we vote of the member	of the regis liability co s of the lim he limited li	tered office mpany, it ted liability ability co	Florida, it is hereby confirmed that after ce and the business office of the register is hereby confirmed that the change(s) ity company or as otherwise provided in impany. Authorized Person		
Sign	ature 1 a member or authorized repre	sentative of a member	2011	IT HODO,	Printed or typed name of signec		
provis the ob to mer	ions of all statutes relative to a ligations of my position as reg rely reflect a change in the reg ra in writing of this change.	the proper and comple sistered agent as provi	ete performa ded for in C	nce of my hapter 60	pacity. I further agree to comply with the dividence of t		
Signati	Jetuin Gueffer ure O Registered Agent Corporati	on Service Company	v BY: Sv	lvia Ouc	eppet, Asst. Vice President		

Division of Corporations ● P.O. Box 6327 ● Tallahassee, FL 32314 FILING FEE: \$25.00