## L090000 18705

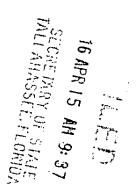
(Requestor's Name)							
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(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
, ,							
(Document Number)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing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

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APR 19 2016 J SHIVERS



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: April 13, 2016

Order#: 087781/083

Re: KGI DESTINATIONS, 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:Grace Kirby 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, Floreda 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.

I. Na	ame of the limited lial	onity company: _	KGI DESTINA	HONS, LL		<u>-</u>		
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			(b)	(b) One Vance Gap Road  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
					Attn: Leg	nal Dent		
	Orlando	FL	32817	Asheville, NC 28805				
	02/25/2009				L09000018705			
3.	Date of filir	g/registration in	Florida	4.		Document n	umber	
5. (a)	NRAI Services, Ir	ıc						
J. (a)	Registered Agent and Re		n on the records of	the Florida	Dept. of State	- e:		
	1200 South Pine Island Road							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				-			
	<b>g</b>	<u></u>			-			
(b)	· · · · · · · · · · · · · · · · · · ·	······································		<u>.</u>	•	_	<u> </u>	
	Plantation		, FI	33324		_	5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	
							ARC AP	
	Corporation Service Company				_	15 SSS 15		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :					1		
	1201 Hays Street				_	C 90 C 1		
	NEW Registered Office Address:						I E	
						-		
	Tallahassee		, FI	32301		_		
the cha agent v was/w	ange or changes are m will be identical. Or,	ade, the Florida s in the case of a F offirmative vote o	street address of lorida limited linf the members	f the regis lability co of the limited limited limited	tered office mpany, it is ited liability iability con	e and the busi s hereby conf y company or	reby confirmed that after iness office of the registered firmed that the change(s) r as otherwise provided in	
Signa	More of a member or authorized representative of a member					ed name of signee		
provisi the obi to mer	ions of all statutes rel	ative to the prope on as registered a 1 the registered o	er and complete	e pertorma	ince of my i	duties, and L	er agree to comply with the am familiar with and accep this document is being filed ability company has been	
	sea Co-Kubli	_						
_	ire of Registered Agent C	orporation Serv	ice Company	BY: G	race E. Kii	rby, Asst. V	ice President	

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