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EXAMINER
DEC 1 7 2010

COVER LETTER

Division of Corp					
SUBJECT: Cel	ebrity Resorts Vac	ation Club Management	, LLC		
•	Name of Limi	ted Liability Company	<u> </u>		
The enclosed Articles of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
		Anna M. DiRocco			
		Name of Person			
Celebrity Resorts					
		Firm/Company			
P. O. Box 690999					
		Address			
Orlando, Florida 32869-0999					
	City/State and Zip Code				
	anna.dirocco@celebrityresorts.com				
	E-mail address: (t	o be used for future annual report notific	ation)		
For further information co	ncerning this matter, please ca	all:			
Anna	M. DiRocco	at (407) 9	97-5774		
Name of	Person	Area Code & Daytime	Telephone Number		
Enclosed is a check for the	following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

F/LED 10 DEC 16 PM 1: 12

		SEURE	LARY OF STATE
Celebrity Resorts Vac	cation Club Manag	CHICHL LLO	ASSEE, FLORIDA
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appear imited Liability Company)	s on our records.)	
,	, ,		
The Articles of Organization for this Limited Liability Co	mpany were filed on	04/19/10	and assigned
Florida document number L09000032997	<u>_</u>		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limit</u>	ad liability assuments box	••	
		_	
	Club Management, I		TA CON 11 11 11
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Compa	ny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:	•		
(Principal office address MUST BE A STREET ADDRI	<u> </u>		
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
	· · · · · · · · · · · · · · · · · · ·		
B. If amending the registered agent and/or registe			
registered agent and/or the new registered office addre		ur records, enter	the name of the new
Name of New Registered Agent:			
N. D. : 4 1000 A 11			
New Registered Office Address:	Ent	er Florida street ada	hress.
	District 1 to the street wantess		
	City	, Florida	Zip Code
	civ		Lip Coue

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member **Title** Name **Address Type of Action** MGR Celebrity Resorts Club 8451 Palm Parkway . ☐ Add Orlando, Florida 32836 Remove Holdings, LLC MGR Legacy Club 8451 Palm Parkway ✓ Add Remove Orlando, Florida 32836 Holdings, LLC ☐ Add Remove Add 🔲 Remove ∐Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Jared M. Meyers, CEO

Typed or printed name of signee

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Filing Fee: \$25.00