

L10000107060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

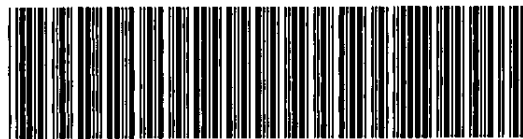
Special Instructions to Filing Officer:

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**B. KOHR**

FEB 17 2012

**EXAMINER**



100220551141

02/17/12--01001--013 \*\*25.00

12 FEB 13 AM 8:07

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT:

Vacation Ownership Realty LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vernor L. Toland

Name of Person

Vacation Ownership Realty LLC

Firm/Company

PO Box 560544

Address

Orlando, Florida 32856

City/State and Zip Code

Vern.Toland@Vorealty.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vernor L. Toland

Name of Person

at (407) 234-6874

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

12 FEB 13 AM 8:07  
FILED  
CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Vacation Ownership Realty LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

12 FEB 13  
FILED  
MAR 8 2013  
CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 10-13-10 and assigned  
Florida document number 410000107060.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

7380 Sand Lake Road  
Suite 500  
Orlando, Florida 32819

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

PO Box 560544  
Orlando, Florida  
32856

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

**Name of New Registered Agent:**

Vernor L. Tolan

**New Registered Office Address:**

7380 Sand Lake Road, Suite 500

*Enter Florida street address*

Orlando

*City*

Florida

32819

*Zip Code*

**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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated 2-9-2012, 2012.

Signature of a member or authorized representative of a member

Typed or printed name of signee