## M000000000072

(Re	equestor's Name)
(Ad	idress)
(Ad	dress)
•	•
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT ' MAIL
(Bu	isiness Entity Name)
	•
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Till/ng Officery
Special instructions to	Pling Officer.
	Office Use Only



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RECEIVED

OF SEP 26 PH 2: 44

06 SEP 26 AM 8: 50 ECRETARY OF STAT LLAHASSEE, FLORII



IUN BENTIGE GUMPANY
ACCOUNT NO. : 07210000032
REFERENCE : 393907 4809148 & C
AUTHORIZATION : THE BELLEN TO THE PARTY OF T
COST LIMIT : \$ 25.00
ORDER DATE : September 11, 2006
ORDER TIME : 2:09 PM
ORDER NO. : 383907-010
CUSTOMER NO: 4809148
<u>CHANGE OF AGENT</u>
NAME: HILTON GRAND VACATIONS COMPANY, LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  XX PLAIN STAMPED COPY
CONTACT PERSON: Amanda Haddan

EXAMINER'S INITIALS:

## • STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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.

1. The name of the limited	d liability company is	S: HILTON GE	RAND VACATIONS	COMPANY, LLC		
2. The mailing address of	the limited liability	company is:	6355 Metrowest Blvo	d., Suite 180,		
Orlando, FL 32835						
January 7, 2000			M00000000072			
3. Date of filing/registrati	4. Document number					
5. The name of the registe Florida Department of S	red agent and the reg State:	sistered office	address as shown	on the records of the		
<u>.</u>	Rebecca Sloan					
Nan				12 SE		
6355 Metrowest Blvd., Suite 180 Address						
	· Orlando, FL 32835			1 2 6		
	City, State and Zip			55.7		
6. The name and address	of the new registered	agent and/or	office:	06 SEP 26 AM 8: 50 SEURETARY OF STAND TALLAHASSEE, FLORID		
Corporation Service Company						
	12	Name 01 Hays Street		ADE		
Florida street address (P.O. Box NOT acceptable)						
	Tallahassec		32301			
	City	, State and Zi	)	<del> </del>		
	hange or changes are the registered agent reby confirmed that	made, the Flowill be identithe change(s) ny or as other lity company.	orida street address cal. Or, in the case was/were authoriz	s of the registered office e of a Florida limited		
Rebecca L. Sloan, M. (Printed or typed name of signed	lember, Managmen	t Committee	?			
I hereby accept the apportunity with the provision and I am familiar with at Chapter 608, F.S. Or, if address, I hereby confirm (Signature of Registered Agent)	- Rulling	Lan	ree to act in this of per and complete ition as registered ely reflect a chang has been notified	capacity. I further agree to performance of my duties, I agent as provided for in ge in the registered office in writing of this change.		

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