## mu7000002133

(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:	(Re	questor's Name)		
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DIVISION DE COMPARATIONS
TALL AVASSEE FLORIDA

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B. KOHR

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**EXAMINER** 

NUL 25 PM 1: 15

FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)656-6446

OFFICE USE ONLY

WALK-IN

**ENTITY NAME:** 

WILSON RESORT FINANCE, LLC

CK# 3443

AMOUNT \$50.00 (\$25.00 for this filing)

PLEASE FILE THE CHANGE OF AGENT & RETURN THE FOLLOWING:

\_\_\_ CERTIFIED COPY

XXX STAMPED COPY

\_\_\_ CERTIFICATE OF STATUS

DEPARTMENT OF STATE OF STATE OF CORPORATION OF CORPORATION OF CORPORATION OF STATE OF SUFFICIENCY OF FILLS.

## 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.

۱.	Name of the limited liability company: Wilson Resort Finance, LLC		
2.	(a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	8505 W Irlo Bronson Memorial Hwy.	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		Kissimmee, Florida 34747	
		Same as Principal Office Address  M07000002133  Document number  coords of the Florida Dept. of State:	
	04/12/2007	M07000002133	
3.	Date of filing/registration in Florida	4. Document number	
5.	(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State;		
	Registered Agent:	Brian T. Lower	
	Registered Office Address:	8505 West Irlo Bronson Memorial Hwy.  Kissimmee, Florida 34747	
	(b) Enter name of NEW Registered Agent and/or NEW Re	gistered Office address:	
	NEW Registered Agent:	NRAI Services, Inc.	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	2731 Executive Park Drive, Suite 4 Weston , FL 33331	
after regist the cl	limited liability company is not organized under the laws of the change or changes are made, the Florida street address of the ered agent will be identical. Or, in the case of a Florida limite hange(s) was/were authorized by an affirmative vote of the n wise browlded in the articles of organization or the operating agent at the of a member or authorized representative of a member)	e registered office and the business office of the diability company, it is hereby confirmed that nembers of the limited liability company or as	
	ael J. Thompson, Senior Vice President led or typed name of signee)	_	
the pand of docard	eby accept the appointment as registered agent and agree to acrovisions of all statutes relative to the proper and complete peaccept the obligations of my position as registered agent as the proper in the registered ity company has been notified in writing of this change.  While the property of the property of the registered in writing of the change.	erformance of my duties, and I am familiar with provided for in Chapter 608, F.S. Or, if this	

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