M10000000468

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	idress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Bu	ısiness Entity Nar	me)			
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					





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I ALBRITTON

COVER LETTER

-		n Section Corporations			
SUBJECT:	Wynd	ham Vacation Rentals North Ai	merica, LLC		
		Name of Foreig	gn Limited	Liability Co	mpany
Dear Sir or N	Madam	ı:			
The enclosed	appli	cation, certificate and fee(s)	are submit	ted for filing). >'
Please return	all co	rrespondence concerning th	is matter to	the following	ng:
Sarah Anderso	n				
		Name of Person			
Vacasa LLC					
	,	Firm/Company			
850 NW 13th	Avenue	:			
		Address			
Portland, OR 9	7209				
	•	City/State and Zip Cod	e		
agentnotices@	vacasa.	com			
E-mail add	lress: (to be used for future annual	report noti	fication)	
For further in	forma	tion concerning this matter,	please call	· •	
Sarah Anderso	n		503	980-83	317
	Nan	ne of Person	- \-	Code & Dayt	ime Telephone Number
	<u>ız Addı</u>			Street A	ddress:
Registration Section			Registration Section		
Division of Corporations			Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee		
Tanai	nassee	s, FL 32314			. Monroe Street, Suite 810 ssee, FL 32303
Enclo	sed is	a check for the following	amount:		
■\$25 Filing		☐ \$30 Filing Fee &	□ \$55 Fil	ing Fee &	☐ \$60 Filing Fee,
J		Certificate of Status		ed Copy	Certificate of Status & Certified Copy



May 28, 2020

SARAH ANDERSON VACASA LLC 850 NW 13TH AVENUE PORTLAND, OR 97209

SUBJECT: WYNDHAM VACATION RENTALS NORTH AMERICA, LLC

Ref. Number: M10000000468

We have received your document for WYNDHAM VACATION RENTALS NORTH AMERICA, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 220A00010597

www.sunbiz.org

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Name of limited liability Company as it appears	
State: Wyndham Vacation Rentals North Ame	enca, LLC
Enter new principal office address, if applicable	
(<u>Principal office address</u> MUST BE A STREET ADDRESS)	erica, LLC
Enter new mailing address, if applicable: (Mailing address)	
MAY BE A POST OFFICE BOX)	·
2. The Florida document number of this limited	liability company is: M10000000468
4. Date authorized to do business in Florida. 02	2 - 02 - 2010
SECTION II (5-9 complete only the applicable	
(m	W - Acq. Vacation Rentals North America, LLC nust contain "Limited Liability Company," "L.L.C.," or "LLC.")
copy of the written consent of the managers or n nust contain "Limited Liability Company," "L.I	tered officer address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida Street Address
_	, Florida
	City Zip Code
New Registered Agent's Signature, if changing I	Registered Agent:
he provisions of all statutes relative to the prope and accept the obligations of my position as regi	gent and agree to act in this capacity. I further agree to comply with her and complete performance of my duties, and I am familiar with histored agent as provided for in Chapter 605, F.S. Or, if this ge in the registered office address, I hereby confirm that the limited

Title/ Capacity	Name	Address	Type of Action
			□Add
			□Rcmo
			□Remov
·			□Add
			□Remo
·			□Add
			□Remov
· —			□Add
aforementioned am	ne law of which this entity is organi	he official having custody of records in the	□Remov

Filing Fee: \$25.00

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "WYNDHAM VACATION RENTALS NORTH AMERICA, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "W - ACQ. VACATION RENTALS NORTH AMERICA, LLC" ON THE TWENTY-THIRD DAY OF MARCH, A.D. 2020, AT 3:23

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



Authentication: 203169666

Date: 06-24-20

2795467 8320 SR# 20205887958



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "W - ACQ. VACATION RENTALS NORTH

AMERICA, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF

DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR

AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINTH DAY OF APRIL,

A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "W - ACQ.

VACATION RENTALS NORTH AMERICA, LLC" WAS FORMED ON THE ELEVENTH DAY

OF SEPTEMBER, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

STORY OF THE PARTY OF THE PARTY

Authentication: 202743341

Date: 04-09-20