

M11000005716

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : M. BURR KEIM COMPANY
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE
LEGACY RESORT ASSETS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2019 JUL 10 10:08 AM

STATE OF FLORIDA
DIVISION OF CORPORATIONS

2019 JUL 10 AM 10:20

FILED

(((H190002096203)))

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

Pursuant to the provisions of sections 605 0114 or 605 0116, 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. Name of the limited liability company: LEGACY RESORT ASSETS, LLC

2. (a) CIRA CENTRE (b) CIRA CENTRE

Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)

2929 ARCH STREET

2929 ARCH STREET

PHILADELPHIA, PA 19104

PHILADELPHIA, PA 19104

11/14/2011

M11000005716

3. Date of filing/registration in Florida

4. Document number

5. (a) TEE, VIRGINIA, ESQ

Registered Agent and Registered Office shown on the records of the Florida Dept. of State.

200 OCEAN CREST DRIVE

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

SUITE 31 - LEGAL DEPT

PALM COAST, FL 32137

(b) W. BRADLEY MUNROE, ESQUIRE

Enter name of NEW Registered Agent and/or NEW Registered Office address

239 E. VIRGINIA STREET

NEW Registered Office Address

TALLAHASSEE, FL 32301

2019 JUL 10 AM 10:20 SECRETARY OF STATE TALLAHASSEE, FL OFFICE

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Amy Wilde

AMY WILDE

Signature of a member or authorized representative of a member

Printed or typed name of signer

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 605, 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.

Signature of Registered Agent

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

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