TOP OCCOON

(Requestor's Name)					
(Address)					
(Addı	ress)				
(City/	'State/Zip/Phon	e #)			
☐ PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					





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TALLAHASSEE, FLUIN

91.4 ... 51. 11.6

R WHITE AUG 10 2001 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

		ACCOUN'	T NO.	:	12000000)195
		REFE	RENCE	:	939206	8346014
		AUTHORIZ	NOITA	:	Invel &	lenan
		COST	LIMIT	:	\$ 35,00	e nous
ORDER D	DATE :	August 2,	2021			
ORDER T	TIME :	11:04 AM				
ORDER N	10. :	939206-167				
CUSTOME	ER NO:	8346014				
	 -	·				-
		<u>CHANG</u>	E OF AC	GEN	<u>T</u>	
	NAME:	STAR IS: ASSOCIA			TION OWNER	RSHIP
PLEASE	RETURN	THE FOLLOW	ING AS	PR	OOF OF FII	LING:
	-	FIED COPY STAMPED CO	PY			
CONTACT	PERSON	N: Alexxis	Weilar	nd	EXT#	

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corpo	502, 617.0502, 607.1508, or 617.1508, Florida Stat ration organized under the laws of the State of Fk fice or registered agent, or both, in the State of Flor	orlda
		AND VACATION OWNERSHIP ASSOCIA	
2. The principa	office address: 5000 Avenu	e of the Stars, Kissimmee, FL 34746	
3. The mailing	address (if different):		
4. Date of incor	poration/qualification: 01/2	1/2000 Document number: N0000000	0407
5. The name an		t registered agent and registered office on file with	
	Corporate Creations Netw	rork, Inc.	
	801 US Highway 1		_
	North Palm Beach, FL 33	3408	-
6. The name an (if changed):		gistered agent (if changed) and /or registered office	
	Corporation Service Comp	pany	:
	1201 Hays Street		-:-!
	T-H-b-ss-s	P.O. Box NOT acceptable	. <u></u>
	Tallahassee	FL 32301	
The street addr as changed wil	ess of its registered office ar I be identical.	nd the street address of the business office of its re	egistered agent,
Such change wanthorized by t	as authorized by resolution on the board, or the corporation	duly adopted by its board of directors or by an off has been notified in writing of the change.	licer so
Susan Blevin	(A) MI(OD	Susan Blevins, President	
I hereby accept I further agree of my duties, and document is be corporation had Corporation By:	the appointment as register to comply with the provision of am familiar with and acting filed marely to reflect a company of the company of t	Printed or typed name and title red agent and agree to act in this capacity. In so fall statutes relative to the proper and complete the obligation of my position as registered a change in the registered office address. I hereby this change. 8 13 000	ete performance gent. Or, if this confirm that the
	••	FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)