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N06157

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: The Harbor Club	Owners Association, Inc.	
DOCUMENT NUMBER: N06157		
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
Suzanne Hickey		
(1)	Name of Contact Person)	
Legacy Vacation Club, LLC		
	(Firm/ Company)	
8451 Palm Parkway		
	(Address)	
Lake Buena Vista, FL 32836		
, ((City/ State and Zip Code)	
suzanne.hickey@legacyvacationch E-mail address: (to be u	ub.com used for future annual report	notification)
For further information concerning this matter, ple		
Anthony J. Picciano	at (407) 997-3000
(Name of Contact Person)	(Area Co) 997-3000 ode & Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florida Dep	artment of State:
☑ \$35 Filing Fee ☐\$43.75 Filing Fee Certificate of Stat	c & \$\subset\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$ \$\subset\$\$\$\$ \$\subset\$\$\$\$\$\$\$\$\$ \$\subset\$	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street	Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

The Harbor Club Owners Association, In			
(Name of Corpor	ation as currently	filed with the Florid	la Dept, of State)
N06157			
	Number of Corpor	ration (if known)	
Pursuant to the provisions of section 617. following amendment(s) to its Articles of		es, this <i>Florida Not I</i>	For Profit Corporation adopts the
A. If amending name, enter the new na	me of the corpora	tion:	
The new name must be distinguishable an "Corp." or "Inc." "Company" or "Co." B. Enter new principal office address, i	may not be used in		corporated" or the abbreviation
(Principal office address MUST BE A ST)	
			
C. Enter new mailing address, if applie (Mailing address MAY BE A POST C	cable: OFFICE BOX)		11 DEC 19 AM
			5
			7
			
D. If amending the registered agent and new registered agent and/or the new			
Name of New Registered Agent:	Anthony J. Piccia	no	
	8451 Palm Parkwa		
New Registered Office Address:		(l·lorīda street address)	
	Lake Buena Vista		, Florida <u>32836</u>
		(City)	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe Sign	ered agent. I am fa	miliar with and acce	•
,	Anthony J.	stered Agent, if chang Picciano	erren

Page 1 of 4

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.) Address Name Title(s) 1) DP ___ Jared M. Meyers 8451 Palm Parkway Lake Buena Vista, FL 32836 2) DVPT Anthony J. Picciano 8451 Palm Parkway Lake Buena Vista, FL 32836 Damola Aré 3) DS _ 8451 Palm Parkway Lake Buena Vista, FL 32836 <u>d:</u>

<u>If REMOVIN</u>	NG an officer and/or director, please list t	he title(s) and nai	me of the officer/director to be removed
Title(s)	Name	<u>Title(s)</u>	<u>Name</u>
1) <u>S</u>	Jared M. Meyers	4)	
2)		5)	
3)		6)	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)							
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The	date of each amendment(s) adoption: 09/30/11	
Effe	ctive date if applicable:	
	(no more than 90 days after amendment file date)	
Ada	ption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
V	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	Dated	
	Signature P	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected by an incorporator – if in the hands of a receiver, trustee, or	
	other court appointed fiduciary by that fiduciary)	
	JARED M. MEYERS	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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