N100000011

(Requestor's Name)					
(Address)					
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE : 939206 8346014 AUTHORIZATION : Spelle Mar					
AUTHORIZATION : Spelle Common Harris					
COST LIMIT : \$ 35.00					
ORDER DATE : August 2, 2021					
ORDER TIME : 11:17 AM					
ORDER NO. : 939206-142					
CUSTOMER NO: 8346014					
CHANGE OF AGENT					
NAME: REUNION ORLANDO VACATION OWNERS ASSOCIATION, INC.					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY					

EXAMINER:

CONTACT PERSON: Alexxis Weiland -- EXT#

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

statement of cha	provisions of sections 607.0502, 617.050 mge is submitted for a corporation organ r to change its registered office or regist	nized under the laws of the	State of Florida	is
	the corporation: REUNION ORLANDO	-		
The name of t The principal	office address: 6277 Sea Harbor Drive,	Orlando, FL 32821		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 09/16/2010	Document number:	N10000008779	
	I street address of the current registered a trnent of State: (If resigned, enter resigne		on file with the	
	Corporate Creations Network, Inc.			
	801 US Highway 1			
	North Palm Beach, FL 33408			
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or reg	istered office	
	Corporation Service Company			
	1201 Hays Street			-
	P.O. Bo Tallahassee	ox NOT acceptable FL 32301	ı	
				. L.,
The street addre as changed will	ess of its registered office and the street be identical.	address of the business o	ffice of its registere	
Such change wa authorized by th	as authorized by resolution duly adopte ne board, or the corporation has been no	d by its board of directors of the ch	or by an officer so	8: 42
David Menese		David Meneses, Presid	fent F	10
Signatui	re of an officer or director	Printed or typed		
Corporation has Corporation	the appointment as registered agent are to comply with the provisions of all stated I am familiar with and accept the obing filed merely to reflect a change in the been notified in writing of this change of the Company	nd agree to act in this cap tutes relative to the propel ligation of my position as ne registered office addres	acity. r and complete perf registered agent. (is, I hereby confirm	formance Or, if this that the
If signing on be	half of an entity:			
	, Asst. Vice President yped or Printed Name			
·	* * * FILING FI	EE: \$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)