(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



800389285708

2022 JUN 13 PM 3:28 RECEIVED

2022 JUN 13 AM 9: 00

C/ 10/14/2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

AC	COUNT NO.	:	1200000001	95		
	REFERENCE	:	732116	8087058		
AUTH	ORIZATION	; _	V Xao			
C	OST LIMIT	:	\$\\35.00	ran		
ORDER DATE : June 8	, 2022					
ORDER TIME : 12:51	PM					
ORDER NO. : 732116	-144					
CUSTOMER NO: 808	7058					
CHANGE OF AGENT						
NAME: VACATION VILLAS AT FANTASYWORLD TWO TIMESHARE OWNER'S ASSOCIATION, INC.						
PLEASE RETURN THE FO	PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyl	iena Baker		EXT#			
			EXAMINER:			

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

statement of cha	nge is submitted for a corporati	, 617.0502, 607.1508, or 617.1508, Florida Sta ion organized under the laws of the State of ${\sf FL}$		
		or registered agent, or both, in the State of Flor		
1. The name of t	he corporation: VACATION VILLAS	S AT FANTASYWORLD TWO TIMESHARE OWNER'S AS	SSOCIATION, INC.	
2. The principal	office address: 4999 KYNGS H	EATH BLVD., KISSIMMEE, FL 34746		
3. The mailing a	ddress (if different): One Vand	ce Gap Road Attn: Legal Dept., Asheville	e, NC 28805	
4. Date of incorp	oration/qualification: 07/14/19	97 Document number: N97000003	3995	
	I street address of the current reg tment of State: (If resigned, ente	gistered agent and registered office on file with er resigned)	the	
	CORPORATE CREATIONS I	NETWORK INC.		
	801 US HIGHWAY 1		J™. 2022 JUN Silik	
	NORTH PALM BEACH, FL 33408			
6. The name and (if changed):	street address of the new regist	ered agent (if changed) and /or registered office	3 3	
	Corporation Service Company	у	. 99 S	
	1201 Hays Street		m <b>0</b>	
		P.O. Box NOT acceptable		
	Tallahassee	FL 32301		
The street addre as changed will	ss of its registered office and the identical.	he street address of the business office of its re	egistered agent,	
Such change wa authorized by th		y adopted by its board of directors or by an off s been notified in writing of the change.	ficer so	
X	ie E. Cionie	Jill Cilmi, Vice President		
I hereby accept I further agree t of my duties, and document is bein corporation has	p of an officer or director. The appointment as registered i	Printed or typed name and title agent and agree to act in this capacity of all statutes relative to the proper and complete the obligation of my position as registered a nge in the registered office address. I hereby is change.	ete performance gent. Or, if this confirm that the	
<b>-</b> j.	. t-Kuby	06/10/2022		
Sign	nature of Registered Agent	Date		
If signing on bel	half of an entity:			
	Asst. Vice President	<u></u>		
Ту	ped or Printed Name			

\* \* \* FILING FEE: \$35.00 \* \* \*