PIDOOO	78134
(Requestor's Name) (Address) (Address)	400212271824
(City/State/Zip/Phone #) PICK-UP MAIT MAIL . (Business Entity Name)	09/20/1101008025 **35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	FILED 2011 SEP 20 PH 12: 13 SECRE FARY OF STATE TALLAHASSEE, FLORID.
Office Use Only	

R.A. TBrown 9-22-11

* **COVER LETTER** TO: Amendment Section **Division of Corporations** SUBJECT: Name of Corporation 1000 78 **DOCUMENT NUMBER:** The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: 12 ROACISUE2 Name of Contact Person Timeshare Kesales INC E-mail address: (to be for future annual report notification For further information concerning this matter, please call: (UU305-72.5-0880 Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Name of Contact Person

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

Street Address: Amendment Section **Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

CR2E045 (8/05)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _ in order to change its registered office or registered agent, or both, in the State of Florida

1. The name of the corporation 2. The principal office address

3. The mailing address (if different):

0000 4. Date of incorporation/qualification: Document number:

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

0

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Register

If signing on behalf of an entity:

Typed or Printed Name

* * * 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 (8/05)