# P13000060315

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# **COVER LETTER**

Division of Corp	orations	·
NAME OF CORPO	RATION: National Timestane Owners Association, of	<u>)</u> (
DOCUMENT NUM	BER: <u>P130000 (20315</u>	3
The enclosed Articles	of Amendment and fee are submitted for filing.	je"
Please return all corre	spondence concerning this matter to the following:	
	Christy Crist	
•	Name of Contact Person  Association of Vacation During Line  Firm/ Company  Address  Address  Petersburg FL 33716  City/ State and Zip Code	
Ear forther information	Christy Oday Shot. Com  E-mail address: (to be used for future annual report notification)	*
ror further informatio	n concerning this matter, please call:	
Christy Name	Crist  at (12) HG2-0568  The Contact Person Area Code & Daytime Telephone Number	
Enclosed is a check for	r the following amount made payable to the Florida Department of State:	
\$2\$35 Filing Fee	□\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status	

(Additional copy is

enclosed)

### **Mailing Address**

TO: Amendment Section

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

Certified Copy

(Additional Copy is enclosed)

## Articles of Amendment to Articles of Incorporation of

- National Timeshare Owners Association Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P13000060315
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>corporation</i> adopts the following amendment(s) this Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviations "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent N/19
(Florida street address)
New Registered Office Address:, Florida
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: $\underline{X}$ Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		NA	 
Add			
Remove			
2) Change			
Add			
Remove			<del></del>
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
<u> </u>			
6) Change			 
Add			
Remove			

If an amendment provides  provisions for implementi  (if not applicable, india	if necessary).	les, enter change(s) here: (Be specific)
If an amendment provides provisions for implementi (if not applicable, indic		
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(if not applicable, indi	for an exchang	ge, reclassification, or cancellation of issued shares,
	<u>ng tne amenon</u> :ate N/A)	pent if not contained in the amendment itself:
<del></del>	<u> </u>	
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<del>_</del>	<del></del>	

The date of each amendment(s) adoption: date this document was signed.		
Effective date if applicable:		
(no more than 90 days after amendment file date)	_	
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.		
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):		
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by		
(voting group)		
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.		
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.		
Dated		
Signature ///	_	
(Be a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court		
appointed fiduciary by that fiduciary)		
Christy A. Crist	_	
(Typed or printed name of person signing)		
Director (Title of person signing)	_	