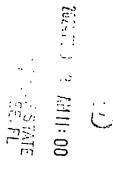
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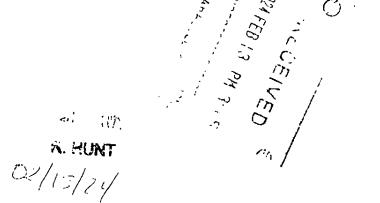
(Requestor's Name)
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CORPORATION SERVICE COMPANY
1201 Hays Street

CERTIFIED COPY
XX PLAIN STAMPED COPY

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO. : I	20000000195	
	REFERENCE : 3	303084 471358	2
	AUTHORIZATION :	Lypell Bless	الم
	COST LIMIT : \$	35.00	
ORDER DATE :	February 1, 2024		
ORDER TIME :	1:29 PM		1 3 7 1
ORDER NO. :	303084-110		
CUSTOMER NO:	4713582		()
	CHANGE OF AGENT		HI COO
NAME:	BLUEGREEN VACATION INC.	IS UNLIMITED,	
PLEASE RETURN	THE FOLLOWING AS PROC	F OF FILING:	

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

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

statement of cha	nge is submitted for a corporation	17.0302, 607.1308, or 617.1308, Florida Statu n organized under the laws of the State of <u>FL</u> registered agent, or both, in the State of Flori	
1. The name of	the corporation: BLUEGREEN VA	CATIONS UNLIMITED, INC.	
2. The principal			
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 07/19/1993	Document number: P930000516	553
	I street address of the current regis timent of State: (If resigned, enter	tered agent and registered office on file with thresigned)	ıe
	CORPORATE CREATIONS NE	ETWORK, INC.	
	801 US HIGHWAY 1		267
	NORTH PALM BEACH	FL 33408	سأ
6. The name and (if changed):	I street address of the new register Corporation Service Company	ed agent (if changed) and /or registered office	3 ANII: 00
	1201 Hays Street	m	ö
	· · · · · · · · · · · · · · · · · · ·	P.O. Box NOT acceptable	
	Tallahassee	FL 32301	
The street addre as changed will	ess of its registered office and the be identical.	street address of the business office of its reg	gistered agent
Such change wa authorized by th	as authorized by resolution duly a ne board, or the corporation has b	dopted by its board of directors or by an officeen notified in writing of the change.	cer so
X	el & agni	Jill Cilmi, Vice President	
I further agree to of my duties, an document is bei corporation has	the appointment as registered ag the appointment as registered ag to comply with the provisions of a d I am familiar with and accept I ng filed merely to reflect a chang been notified in writing of this c n Service Company	Printed or typed name and title tent and agree to act in this capacity, all statutes relative to the proper and complet the obligation of my position as registered ag- we in the registered office address. I hereby co- hange.	'e performanc ent. Or, if thi onfirm that the
		02/12/2024	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	by, Asst. Vice President	_	
T ₂	ped or Printed Name		

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