2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000115473

Entity Name: CLC FRACTIONAL, LLC

Current Principal Place of Business:

C/O ENCANTADA RESORTS, ATTN: GEOFF BRUCE 3070 SECRET LAKE DRIVE KISSIMMEE, FL 34747

Current Mailing Address:

C/O ENCANTADA RESORTS, ATTN: GEOFF BRUCE

3070 SECRET LAKE DRIVE KISSIMMEE, FL 34747 US

FEI Number: 99-0382043 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DRIVE, STE. A TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Feb 03, 2015

Secretary of State

CC9085731808

Authorized Person(s) Detail:

Title MANAGER

BRUCE, GEOFF Name

Address C/O ENCANTADA RESORTS, ATTN:

GEOFF BRUCE

3070 SECRET LAKE DRIVE

City-State-Zip: KISSIMMEE FL 34747

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GEOFF BRUCE 02/03/2015 MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

Date