# 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: PATRICIA NACIF DE VASCONCELLOS

MGR

03/31/2019

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000151143

Entity Name: NEW GEN VACATIONS, LLC

### Current Principal Place of Business:

8000 LESIA CIRCLE ORLANDO, FL 32835

# **Current Mailing Address:**

8000 LESIA CIRCLE ORLANDO, FL 32835 US

# FEI Number: 83-1001188

# Name and Address of Current Registered Agent:

NACIF DE VASCONCELLO, PATRICIA 8000 LESIA CIRCLE ORLANDO, FL 32835 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

### Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	NACIF DE VASCONCELLO, PATRICIA	Name	ALVAREZ GUARANA, ALEX
Address	8000 LESIA CIRCLE	Address	6000 NE 3RD TERRACE
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	FORT LAUDERDALE FL 33334

. FATRICIA NACIF DE VASCONCELLOS	MGR
Electronic Signature of Signing Authorized Person(s) Detail	

FILED Mar 31, 2019 Secretary of State 8496264312CC

Date

Certificate of Status Desired: No