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From: <corp@ownersupport.info>  
Subject: Fantasy World Transfer Annex Forms  
Date: February 20, 2024 at 3:31:36 PM EST  
To: <[REDACTED]>

Hello [REDACTED]

Thank you for your interest into transferring your membership.

We are providing instructions on what is needed to complete the transfer. Attached are the annex forms. Please follow these instructions:

1. Print and fill out attached form(s).
2. Please return documents to following email address for processing: corp@ownersupport.info
3. Anything owed on the membership must be paid.
  - a. Instructions for pay off will be provided to you once the annex forms have been submitted by yourself.
  - b. The instructions will be for the following: final beneficiary name must be "ADMINISTRADORA DE RESORTS PENINSULA DEL SUR SA DE CV" if final beneficiary name is entered incorrectly by banker, payment will bounce back to member's account and will not proceed; refer to given instructions on the annex form. If your financial institution has a character limit for beneficiary names, this information can also be abbreviated as AR PENINSULA SUR.
  - c. Payment must be made via wire transfer and not credit card due to transfer-sell processing time span limitations.
  - d. Attention: FOR CANADIAN RESIDENTS:
    - i. Please see below the list of the approved Canadian Banks that we can receive Bank drafts from:
      1. Santander
      2. HSBC Bank
      3. Deutsche Bank
      4. Canadian Imperial Bank of Commerce (CIBC)
      5. Scotiabank
4. We will need confirmation of payment print out from the bank to process your payment promptly. Once the payment has reflected in our account, we will issue the approved annex via email and send the original Certificate of release via certified mail to the address provided by yourself. For safety reasons, it is very important that the payment is made by the member and not by a third party.

You will have 10 business days to complete this request starting the moment . Should you have further questions, you may contact us.

We are available Monday-Friday, 10am-6pm.

Christina Moquin  
Member Services  
1 (888) 230 6830  
Email: [corp@ownersupport.info](mailto:corp@ownersupport.info)

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Please Note: Due to the considerable number of inquiries received by our Team, response times may vary. Please consider the environment before printing  
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# TO TRANSFER MY MEMBERSHIP FROM VACATION VILLAS AT FANTASY WORLD

- GET A LETTER STATING YOU ARE TRANSFERING YOUR TIMESHARE MEMBERSHIP WITH THE NAME AND PERSONAL INFORMATION (ADDRESS AND TEL. NUMBERS) OF BUYER (SIGNED BY BOTH PARTIES).
- GET THE ORIGINAL CERTIFICATE OF RELEASE ENDORSED AT THE BACK WITH THE SIGNATURE OF BOTH BUYER & SELLER. IN CASE OF LOST CERTIFICATE USE AFFIDAVIT FORM. IN CASE OF DEATH PLEASE INCLUDE DEATH CERTIFICATE.
- PAY ALL PENDING FEES , (PAYABLE TO: ADMINISTRADORA DE RESORTS PENINSULA DEL SUR SA DE CV)

WE DO NOT TAKE CASHIER'S CHECK.

SEND ALL DOCUMENTS TO:

[corp@ownersupport.info](mailto:corp@ownersupport.info)

P.S. Keep copies of all  
documents

Phone: 1 (888) 230 6830

PLEASE BE ADVISED THAT IN ORDER TO COMPLETE THE TRANSFER OF OWNERSHIP YOUR CONTRACT MUST BE PAID IN FULL.

## TRANSFER OF OWNERSHIP ANNEX

Date: \_\_\_\_\_

This letter serves as the intent to transfer my contract No. 920046363 at  
Vacation Villas Resorts.

I/We: [REDACTED] request to transfer  
the following property:

Contract number: 920046363 Fixed: X Floating: \_\_\_\_\_

Unit: three Week: X or Points: \_\_\_\_\_

First year of use for new owner: \_\_\_\_\_

The new owners hereby agree to accept all Rights and Responsibilities of the timeshare unit or vacation week and all maintenance fees from the current year and subsequent years. New owners agree to accept all current Rules and Regulations and any declaration of condominium.

I/We agree to becoming new owners of contract No. 920046363 at  
Vacation Villas Resorts.

Name: Toctoc Viajes

Address: Calle Arquímedes 151, Polanco, Polanco IV Secc  
Miguel Hidalgo, 11550 Ciudad de México, México

Phone number (Home, Office, Cell Phone):

1 (888) 386 0521 Salida 7 /

Email(s): sales@ttviajes.com

We the undersigned acknowledge that the above information is true and correct to the best of our knowledge, and the property will be granted, conveyed or assigned:

\_\_\_\_\_  
**Sellers(s) print name**

\_\_\_\_\_  
**Buyer(s) Legal Rep.  
print name**

\_\_\_\_\_  
**Seller(s) Signature**

\_\_\_\_\_  
**Buyer(s) Legal Rep.  
Signature**

Account #: 920046363

Authorization agreement for wire transfer payment

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I / We hereby certify that this information is true and accurate. I understand that I must report my Confirmation of Payment via E-mail.

**Final Beneficiary:**

ADMINISTRADORA DE RESORTS PENINSULA DEL SUR SA DE CV

**Optional Abbreviation:**

AR PENINSULA SUR

**Address:**

AV PDTE MASARYK 490 INT 1, MIGUEL HIDALGO, CIUDAD DE MEXICO 11530

**Beneficiary Type:**

BUSINESS

**Bank:**

BANCO SANTANDER

**Main Address:**

AV. MANUEL J. CLOUTHIER, 508 COL. JARDINES DEL CAMPESTRE, LEON 37130

**Branch Address:**

AV PDTE MASARYK 123, MIGUEL HIDALGO, CIUDAD DE MEXICO 11560

**City, State, Country:**

CIUDAD DE MEXICO, MEXICO

**Bank Code, Swift:** BJIOMXMLXXX  
or BJIOMXML

**Account Number:**  
030180900038639310

**CLABE:**  
030180900038639310

**Purpose of Payment:**

COMMERCIAL TRANSACTION

**\$2,564.10 USD**

Resale Fee

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**Member Signature**

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**Print Name & Date**

*TO PROTECT MEMBERS AND MAINTAIN THE INTEGRITY OF OUR INTERNAL POLICES FOR INTERNATIONAL SALES, WE ONLY ACCEPT PAYMENTS FROM SELECT FINANCIAL INSTITUTIONS. THESE INCLUDE BANK OF AMERICA, CHASE, CITIBANK, SANTANDER, HSBC BANK, DEUSCHE BANK, SCOTIABANK, & CIBC. IF YOU HAVE A CREDIT UNION OR DO NOT WORK WITH THESE ESTABLISHED INSTITUTIONS, PLEASE LET US KNOW SO WE MAY VALIDATE ELIGIBILITY TO PROCEED WITH YOUR INTERNATIONAL TRANSACTION. PAYMENTS FROM ROYAL BANK OF CANADA (RBC), TD BANK OF CANADA, AND BANK OF MONTREAL **WILL NOT BE ACCEPTED.***