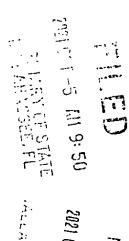
F05000005724

| (Re | equestor's Name) | | | |
|-------------------------|----------------------|---------------------------------------|--|--|
| (Àc | Idress) | | | |
| (Ac | ldress) | | | |
| (Cir | ty/State/Zip/Phone # |) | | |
| PICK-UP | WAIT | MAIL | | |
| (Bu | usiness Entity Name) | · · · · · · · · · · · · · · · · · · · | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of | f Status | | |
| Special instructions to | Filing Officer: | | | |
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Office Use Only



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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : I2000000195 |
|---|
| REFERENCE : 029213 4813078 |
| AUTHORIZATION Spelle Ban |
| COST LIMIT : \$35.00 |
| ORDER DATE: September 23, 2021 |
| ORDER TIME : 1:50 PM |
| ORDER NO. : 029213-029 |
| CUSTOMER NO: 4813078 |
| |
| CHANGE OF AGENT |
| |
| NAME: DISNEY ONLINE |
| |
| |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| CERTIFIED COPY XX PLAIN STAMPED COPY |
| |
| CONTACT PERSON: Eyliena Baker |

EXAMINER'S INITIALS:

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

| statement of cha | mge is submitted for a corporation orga | 502, 607.1508, or 617.1508, Florida Statutes, the anized under the laws of the State of CA istered agent, or both, in the State of Florida. | is |
|---|--|--|-----------------------------------|
| 1. The name of | the corporation: DISNEY ONLINE, INC | · · | |
| 2. The principal | office address: 500 S BUENA VISTA S | ST BURBANK, CA 91521 | |
| 3. The mailing a | address (if different): 500 S BUENA VIS | STA ST BURBANK, CA 91521-0105 | |
| | | Document number: F05000005724 | |
| | d street address of the current registered rtment of State: (If resigned, enter resig | agent and registered office on file with the med) | |
| | GIACALONE, MARGARET C | | |
| | 1375 BUENA VISTA DRIVE 4TH FL | OOR NORTH | |
| | LAKE BUENA VISTA | FL 32830 | |
| 6. The name and (if changed): | d street address of the new registered ag | gent (if changed) and /or registered office | پهٔ ۱۰۰ نو |
| | Corporation Service Company | | ن را مصحبها معامیر |
| | 1201 Hays Street | | الم |
| | | Box NOT acceptable | |
| | Tallahassee | FL 32301 がな | جُ ﴿ |
| The street address changed will | ess of its registered office and the stree be identical. | et address of the business office of its registered | d a ge ht, |
| Such change wa authorized by the | as authorized by resolution duly adopt ne board, or the corporation has been i | led by its board of directors or by an officer so notified in writing of the change. | |
| / Jul 8 | . Whi | Jill Cilmi Vice President | |
| (.) | re of an officer or director | Printed or typed name and title | |
| I further agree of my duties, and document is bei corporation has | the appointment as registered agent a to comply with the provisions of all sta d I am familiar with and accept the of ng filed merely to reflect a change in s been notified in writing of this chang n Service Company | atutes relative to the proper and complete perfa bligation of my position as registered agent. O the registered office address, I hereby confirm | ormance or if this that the |
| By: Dro | ro Tokubi | 09/23/2021 | |
| - ~ 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 | fature of Registered Agent | Date | |
| If signing on be | half of an entity: | | |
| | Asst. Vice President yped or Printed Name | | |

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