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.

SECRETARY

SIGNATURE: GABRIELA KORNZWEIG

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :

Title	MANAGER	Title	SECRETARY
Name	HARRIS, KIMBERLEY D	Name	KORNZWEIG, GABRIELA
Address	30 ROCKEFELLER PLAZA	Address	100 UNIVERSAL CITY PLAZA
City-State-Zip:	NEW YORK NY 10112	City-State-Zip:	UNIVERSAL CITY CA 91608
Title	MANAGER		
Title Name	MANAGER PRABHU, VASANT M		
Name	PRABHU, VASANT M 30 ROCKEFELLER PLAZA		

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.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD

FEI Number: 47-0878025

PLANTATION, FL 33324 US

SIGNATURE:

Current Mailing Address:

100 UNIVERSAL CITY PLAZA

Electronic Signature of Registered Agent

UNIVERSAL CITY, CA 91608 US

2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# M02000002055

Entity Name: UNIVERSAL STUDIOS STORE ORLANDO LLC

Current Principal Place of Business:

100 UNIVERSAL CITY PLAZA UNIVERSAL CITY, CA 91608

Jan 06, 2015 Secretary of State CC0042967821

FILED

Certificate of Status Desired: No

01/06/2015 Date

Date