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

ACCOUNT NO. : I2000000195 REFERENCE : 608468 4813078 AUTHORIZATION COST LIMIT ORDER DATE: April 20, 2017 ORDER TIME : 10:07 PM ORDER NO. : 608468-110 CUSTOMER NO: 4813078 CHANGE OF AGENT NAME: BUENA VISTA THEATRICAL GROUP LTD, INC. PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS:

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

statement of cha	nge is submitted for a corporation org	502, 607,1508, or 617,1508, Florida Statute anized under the laws of the State of New Y istered agent, or both, in the State of Florida	ork.
1 The name of t	he corporation: Buena Vista Theatrica	Group Ltd, Inc.	
2. The principal	On 4:18 faint 40 and Chamak	New York, NY 10036	
3: The mailing a	ddress (if different): 500 South Buena	Vista Street, Burbank, CA 91521	·m·*
4. Date of incorp	poration/qualification: 05/23/2001	Document number: F01000002783	3
5. The name and		d agent and registered office on file with the	•
	Jeffrey S. Craigmile		
	1375 East Buena Vista Drive, 4th Flo	or North	101 MR 24
	Lake Buena Vistá	FL 32830	SSEE
6. The name and (if changed):	street address of the new registered ag	gent (if changed) and /or registered office	12 08. 32 8. 32
	Margaret C. Giacalone		•
	1375 East Buena Vista Drive, 4th Flo	por North	
	P.O. Box No.	OT acceptable FL 32830	
	Fave prietta Atzia	TE 32030	
The street addre	ss of its registered office and the street be identical.	et address of the business office of its regis	tered agent,
Such change wa authorized by th	s authorized by resolution duly adopt e board, or the corporation has been r	ed by its board of directors or by an officer notified in writing of the change.	. żo
	Jan Carling The	Marsha L. Reed, Secretary	
Signatū	e of an officer or director	Printed or typed name and title	
I further agree to performance of agent. Or, if this hereby confirm	my duities, and I am familiar with and	atutes relative to the proper and complete I accept the obligation of my position as re- effect a change in the registered office addr I in writing of this change.	gistered ess. I
- William	nature of Registered Agent	4/7/2017 Date	<u>-</u>
Ü	half of an entity:		
	rped or Printed Name		

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