## F01000005313

(Re	equestor's Name)	
		٠
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nam	e)
	•	•
(Do	ocument Number)	
(	,	
Certified Copies	Certificates	of Status
Certified Copies	Certificates	or Status
	· · · · · · · · · · · · · · · · · · ·	
Special Instructions to	Filing Officer:	

Office Use Only



300298282973

THE PROPERTY OF STATE

APR 25 2017 C MCNAIR CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500 NISION DECORRORATIONS

ACCOUNT NO. : I2000000195

REFERENCE: 608468

4813078

AUTHORIZATION

COST LIMIT :  $\sqrt{$}$ 35.00

ORDER DATE : April 20, 2017

ORDER TIME : 9:34 PM

ORDER NO. : 608468-235

CUSTOMER NO: 4813078

## CHANGE OF AGENT

NAME: WALT DISNEY PARKS AND RESORTS

ONLINE, 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 chi	ange is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, organized under the laws of the State of Californi registered agent, or both, in the State of Florida.	*	
1. The name of	the corporation: Walt Disney Parks	and Resorts Online, Inc.		
	office address: 500 South Buena			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 10/11/2001	Document number: F01000005313		
	d street address of the current regist	tered agent and registered office on file with the esigned)		
	Jeffrey S. Craigmile			
	1375 East Bueną Vistą Drive, 4th	Floor North		
	Lake Buena Vista	FL 32830	TO SEVER	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Margaret C. Giacalone		GORPORATIONS	
	1375 East Buena Vista Drive, 4th Floor North			
	P.O. Bo Lake Šuena Vistá	ox NOT acceptable FL 32830		
The street addre	ess of its registered office and the s be identical.	street address of the business office of its register	ed agent,	
Such change was authorized by the	as authorized by resolution duly ad ne board, or the corporation has be	opted by its board of directors or by an officer so en notified in writing of the change.	)	
Signatu	re of an officer or director	Marsha L. Reed, Secretary		
I hereby accept I further agree of performance of agent. Or, if the hereby confirm	the appointment as registered age to comply with the provisions of al my duties, and I am familiar with	ent and agree to act in this capacity, Il statutes relative to the proper and complete and accept the obligation of my position as regis o reflect a change in the registered office addres	tered s, l	
Margu	Al house	4/7/2017	· · · · · ·	
$U_{ij}$	half of an entity:	Date		
a signification	man of an outry.			
T	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE; \$35:00 \* \* \*