

FO9 000001204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

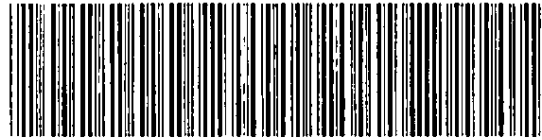
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SECRETARIAT
TALLAHASSEE

2023 MAY -4 AM 8:11

FILED



2023 MAY -4 PM 3:25

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FILE 1ST

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

ACCOUNT NO. : I20000000195

REFERENCE : 692375 4813078

AUTHORIZATION :

Spurlockman

COST LIMIT : \$ 35.00

ORDER DATE : April 21, 2023

ORDER TIME : 1:48 PM

ORDER NO. : 692375-020

CUSTOMER NO: 4813078

FOREIGN FILINGS

NAME: DISNEY PARKS, EXPERIENCES AND
PRODUCTS, INC.

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland-sorenson - EXT#

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

DISNEY PARKS, EXPERIENCES AND PRODUCTS, INC.

(Name of Corporation)

F09000001204

(Document Number of Corporation (if known))

CALIFORNIA 03/24/2009

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

2023 MAY 14 AM 8:11
SECRETARY OF
TALLAHASSEE

FILED



This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

500 SOUTH BUENA VISTA STREET

(Mailing Address)

BURBANK, CA 91521

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Chakira H. Gavazzi

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

04/20/2023

(Date)

CHAKIRA H. GAVAZZI

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)

FILING FEE \$35