

F22000002696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

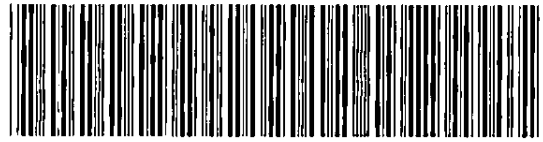
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

Office Use Only



400411025634

2023 NOV 16 PM 12:09  
STATE  
RECORDS

FILED

2023 NOV 16 PM 3:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

A. BUTLER  
NOV 17 2023

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

ACCOUNT NO. : I20000000195

REFERENCE : 125836 4813078

AUTHORIZATION :

COST LIMIT :

*[Handwritten Signature]*  
35.00

ORDER DATE : November 10, 2023

ORDER TIME : 2:17 PM

ORDER NO. : 125836-015

CUSTOMER NO: 4813078

FOREIGN FILINGS

NAME: PROJECT STANLEY CLUB, INC.

CORPORATE  
 LIMITED PARTNERSHIP  
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
 PLAIN STAMPED COPY  
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER: \_\_\_\_\_

PROFIT CORPORATION  
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I  
(1-3 MUST BE COMPLETED)

F22000002696

(Document number of corporation (if known))

FILED  
2023 NOV 16 PM 12:09  
STATE

1. PROJECT STANLEY CLUB, INC.  
(Name of corporation as it appears on the records of the Department of State)

2. DELAWARE 3. 04/29/2022  
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II  
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 11/13/2023

5. STORYLIVING BY DISNEY CLUB, INC.  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)

8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

\_\_\_\_\_

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

\_\_\_\_\_

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|------------------------|-------------|----------------|-----------------------|
|------------------------|-------------|----------------|-----------------------|

|       |       |       |                                 |
|-------|-------|-------|---------------------------------|
| _____ | _____ | _____ | <input type="checkbox"/> Add    |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add    |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add    |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add    |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |
| _____ | _____ | _____ | <input type="checkbox"/> Add    |
| _____ | _____ | _____ | <input type="checkbox"/> Remove |

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

*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)

Chakira H. Gavazzi

\_\_\_\_\_  
 (Typed or printed name of person signing)

Director, Secretary

\_\_\_\_\_  
 (Title of person signing)

**FILING FEE \$35.00**



# The Walt Disney Company

Office of the Corporate Secretary

November 10, 2023

Qualification Filing  
P.O. Box 6327  
Tallahassee, Florida 32314-1300

RE: Authorization to use name Disney in Qualification Amendment of Project Stanley Club, Inc.

To Whom It May Concern:

As Vice President of Governance Administration and Assistant Secretary of The Walt Disney Company (the "Company"), I authorize and approve on behalf of the Company, of Project Stanley Club, Inc.'s request to use Disney in their qualification amendment filing and that they are authorized by the Company to transact business in the state of Florida under the name, of Storyliving by Disney Club, Inc.

If you have any questions, please don't hesitate to contact the Company's Corporate Secretary's office at [Corp.Secretary@disney.com](mailto:Corp.Secretary@disney.com).

Regards,

Chakira H. Gavazzi  
Vice President of Governance Administration & Assistant Secretary

FILED

2023 NOV 16 PM 12:09

SECRET  
STATE

# Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "PROJECT STANLEY CLUB, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "STORYLIVING BY DISNEY CLUB, INC." ON THE THIRTEENTH DAY OF NOVEMBER, A.D. 2023, AT 9:47 O`CLOCK A.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.



  
Jeffrey W. Bullock, Secretary of State

6760344 8320  
SR# 20233995569

Authentication: 204610080  
Date: 11-16-23

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)