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| juestor's Name) | - | | | | | |
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SECRETARY OF STATE

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DEPARTMENT OF STATE

APR 2 5 2017.



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

| | ACCOUNT NO. | : | 12000000195 |
|--------------|----------------|---|----------------|
| | REFERENCE | : | 608468 4813078 |
| | AUTHORIZATION | : | Spellelenan |
| | COST LIMIT | : | \$ 35.00 |
| | | | |
| ORDER DATE : | April 20, 2017 | | |
| ORDER TIME : | 9:58 PM | | |
| ORDER NO. : | 608468-140 | | |
| CUSTOMER NO: | 4813078 | | |
| | | | |

CHANGE OF AGENT

NAME: DISNEY INTERNATIONAL EMPLOYMENT SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS:

S . 1 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607. nge is submitted for a corp r to change its registered o | oration organized | under the lav | ws of the Stat | e of Delawa | are |
|---|---|--|---|---|----------------------------------|--------------------|
| 1. The name of t | he corporation: Disney Inte | ernational Employn | nent Servićê | s, Inc. | | |
| 2. The principal | office address: 500 South | Buena Vista Stree | t, Burbank, C | CA 91521 | | |
| 3. The mailing a | ddress (if different): | | | | | |
| 4. Date of incorp | poration/qualification: 03/ | 18/1993 | _ Document i | number: F9 | 3000001359 | 9 . |
| | street address of the curre | | and registere | ed office on f | ile with the | |
| | Jeffrey S. Craigmile | | | | <u>.</u> | |
| | 1375 East Buena Vista D | rive, 4th Floor Nort | th | | | |
| | Lake Buena Vista | | FL | 32830 | | |
| 6. The name and (if changed): | I street address of the new | registeréd agent (if | changed) and | d /or register | ed office | |
| | Margaret C. Giacalone | <u> </u> | | | ≥ 200 3 | PR 24 |
| | 1375 East Buena Vista D | P.O. Box: NOT accep | | | | 2 |
| | Lake Buena Vista | | | 32830 | 7,0 | 0 |
| The street address changed will | ess of its registered office be identical. | and the street addr | ess of the bu | siness office | of Briefis | tered agent. |
| Such change wa authorized by th | as authorized by resolution ne board, or the corporatio | i duly adopted by i n has been notified | ts board of d I in writing o | lirectors or b | y an officer | SO |
| The Committee | 4-62 3-25 | . <u>Ma</u> | rsha L. Reed | | | |
| I further agree performance of agent. Or, if th hereby confirm | the appointment as regist to comply with the provisi my duties, and I am familis document is being filed that the carporation has IC. Giagalone | ons of all statutes i iar with and accep merely to reflect a seen notified in wri | ree to act in the lative to the straight of the change in the straight of this control of this control of this control of the straight of the | e proper and ion of my po he registered | , d complete sition as res | gistered ess, I |
| | mature of Registered Agent | 1. Q 411 | 7/2017 | Date | <u> </u> | |
| If signing on be | ν half of an entity: | | | | | |
| 1 | yped or Printed Name | | | | | |

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