

L10000035543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

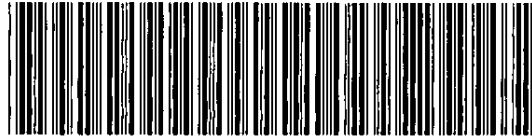
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 25 2017
J. HARRIS

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

ACCOUNT NO. : I20000000195
REFERENCE : 608468 4813078
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : April 20, 2017
ORDER TIME : 10:17 PM
ORDER NO. : 608468-325
CUSTOMER NO: 4813078

CHANGE OF AGENT

NAME: DISNEY VACATION CLUB HAWAII
MANAGEMENT COMPANY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender -- EXT#

EXAMINER: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Disney Vacation Club Hawaii Management Company, LLC

2. (a) _____ Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS) <u>1390 Celebration Boulevard</u> <u>Celebration, FL 34747</u>	(b) _____ Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX) <u>500 South Buena Vista Street</u> <u>Burbank, CA 91521</u>
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3. <u>04/01/2010</u> Date of filing/registration in Florida	4. <u>L1000035543</u> Document number
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5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Jeffrey S. Craigmile
 Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**
1375 East Buena Vista Drive, 4th Floor North
Lake Buena Vista, FL 32830

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(b) _____
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

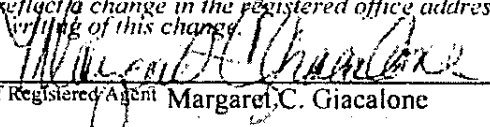
Margaret C. Giacalone
NEW Registered Office Address:
1375 East Buena Vista Drive, 4th Floor North

Lake Buena Vista, FL 32830

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

 _____ Signature of a member or authorized representative of a member	<u>Marsha L. Reed, Vice President and Secretary</u> _____ Printed or typed name of signee
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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



 Signature of Registered Agent Margaret C. Giacalone

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
 FILING FEE: \$25.00