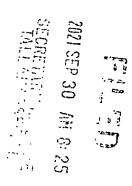


(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer.					

Office Use Only







CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

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.

L. Na	ame of the limited liability company: DISNEY VACAT	FION C	.UB MANA 	GEMENT, LLC	
2. (a)	215 CELEBRATION PLACE	ſ	(b) 500 S BUENA VISTA ST		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	~, <u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	CELEBRATION, FL 34747	_	BURBAI	NK, CA 91521	
	11/20/1990		L170001	50930	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	GIACALONE, MARGARET C				
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1375 E BUENA VISTA DR., 4TH FLOOR N Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			nte:	
	LAKE BUENA VISTA	32830		2021 SEP 30 SECRETARY	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	()65			
	rather name of NEW Registered Agent and/or NEW Registered	Omce a	aaress:	£ (C ·	
	Corporation Service Company			- 1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	NEW Registered Office Address:			- 8 5	
	1201 Hays Street			_ ''	
	Tallahassee FL	32301			
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	register bility co	ed office and ompany, it in ited liabili	nd the business office of the registered is hereby confirmed that the change(s) to company or as otherwise provided in	
/s/Chakira H Gavazzi Chak			akira H Ga	vazzi Authorized Person	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and agroups on sof all statutes relative to the proper and complete in igations of my position as registered agent as provided by reflect a change in the registered office address, I have the property of this change.	ee to ac perform I for in (pereby c	t in this cap ance of my Chapter 60 onfirm that	oacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
<u>ال</u> Signam	re of Registered Agent	Grace	e E. Kirby,	Asst. Vice President	
	\				