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(Re	questor's Name)	
 		
(Ad	(aress)	
(Ac	idress)	
(Ĉi	ty/State/Zip/Phone #)	
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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	· · · · · · · · · · · · · · · · · · ·
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(De	ocument Number)	
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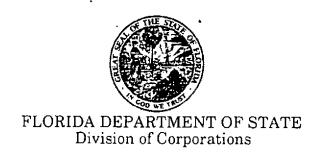
Office Use Only



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January 24, 2023

CORPORATION SERVICE COMPANY

SUBJECT: BUENA VISTA TRADING COMPANY, LLC

Ref. Number: W23000008416

Please give original submission date as file

()

We have received your document for BUENA VISTA TRADING COMPANY, LLC. However, the document has not been filed and is being returned for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 823A00001724

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 391036 AUTHORIZATION : COST LIMIT ORDER DATE: January 23, 2023 ORDER TIME : 9:25 AM ORDER NO. : 391036-040 CUSTOMER NO: 4813078 DOMESTIC AMENDMENT FILING NAME: BUENA VISTA TRADING COMPANY EFFECTIVE DATE: 1 27 2023 XX ARTICLES OF CONVERSION AND ORGANIZATION ____ RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

Division of	Section Corporations				
SUBJECT: Buena	Vista Trading Company,	LLC			
30b3EC1		sulting Florida Li	mited Cor	mpany)	
				nd fees are submitted to convert an accordance with s. 605.1045, F.S.	"Other
Please return all con	respondence concernin	ig this matter to	o:		
Katheleen Duelo					
	(Contact Person)	<u>-</u>			
The Walt Disney Cor	npany				
	(Firm/Company)				
500 South Buena Vis	sta St.				
	(Address)	 	_		
Burbank, CA 91521					
	(City, State and Zip Code)				
corp.secretary@disn	ey.com				
E-mail Address: (to	be used for future annual re	port notifications	.)		
For further informa	tion concerning this ma	itter, please cal	1:		
Katheleen Duelo		_at (<u>818</u>	չ 560-	1000	
(Name of Con	tact Person)	(Агеа Со	de) (Day	ytime Telephone Number)	
	for the following amount a bank located in the			sed by this office must be payable	in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fili and Certified C	~	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Add New Filing 9 Division of 0 P.O. Box 63 Tallahassee,	Section Corporations 27		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303	

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Buena Vista Trading Company
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
October 12, 1992 .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Buena Vista Trading Company, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 20th day of January	20_23
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	Title: Secretary
Signature(s) on behalf of Other Business Entity:	
Signature: Aukin A Auvayyi Printed Name: Chakira H. Gavazzi	
Printed Name: Chakira H. Gavazzi	Title: Director
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	Tid.
Signature:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Pees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
Buena Vista Trading Company, LLC		
(Must contain the words "Limited Liabilit	ry Company, "L.L.C.," or "LLC.")	_
ADTICLE II Address		
ARTICLE II - Address: The mailing address and street address of the property o	rincinal office of the Limited Liability	(Company ie:
The maring address and street address of the pr	incipal office of the Elimited Elability	Company is.
Principal Office Address:	Mailing Address:	
		
215 Celebration Place	215 Celebration Place	_
Suite 300	Suite 300	
Celebration, FL 64747	Celebration 1 34747	_
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)		
The name and the Florida street address of the r	registered agent are:	(_U
	3	<u></u>
Corporation Service Company	<u>/</u>	J.1.24
Name	2	
1201 Hays Street		77
Florida street address (P.O	. Box NOT acceptable)	:: O
Tallahassee	FL ³²³⁰¹	(°)
··	1 1-/	<u> </u>
City	Zip	ည်

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

Cognistered Agent's Signature (REQUIRED)

(CONTINUED)

ΔR	T	CI	F	IV-
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The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Disney Enterprises, Inc.
- STEEL MARKET N	500 South Buena Vista St.
	Burbank, CA 91521
,	
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Chakira H. Gavazzi	with section 605.0203 (1) (b), Florida Statutes. I am aware