(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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700298002927

K. SALY APR 25 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 120000000195 REFERENCE AUTHORIZATION COST LIMIT : \$ 25.00 ORDER DATE: April 20, 2017 ORDER TIME : 10:13 PM ORDER NO. : 608468-350 CUSTOMER NO: 4813078 CHANGE OF AGENT NAME: THE DISNEY CLUB, 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.

2. (a)	<u>*</u>	(b)	
	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)
	1375 East Buena Vista Drive, 4th Floor North	_	500 Sout	th Buena Vista Street
	Lake Buena Vista, FL 32830	_	Burbank	, CA 91521
	. 09/20/1999		L990000	05988
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
). (u)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	E:
	Jeffrey S. Craigmilé			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2	-
	1375 East Buena Vista Drive, 4th Floor North			
			· · · · · · · · · · · · · · · · · · ·	2011 APR 24 SECRETAR TALLAHASS
	Lake Buena Vista FL	32830	**	
/L \.	-			E R
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office adı	Iress:	· SSI
			- 	E OF
	Margaret C. Giacalone			F STA
	NEW Registered Office Address:			DRIE 38
	1375 East Buena Vista Drive, 4th Floor North	·	····	
	Lake Buena Vista , FL	32830		-
he cha igent v was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis bility co f the lim	tered office mpany, it is ited liability	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
G!	1) Sarah 5 75	Mars	sha L. Reed	I, Vice President and Secretary
_	ure of a member or authorized representative of a member			Printed or typed name of signee
provisi he obl o mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ily reflectia change in the registered office address. I h I in whiling of this change, p	pertormo	ince of my e	fulles, and I am tamiliar with and accept

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