

MI500002627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

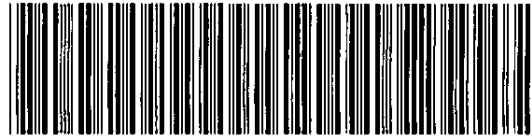
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600298244596

APR 25 2017
S. YOUNG

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 APR 24 AM 9:14

RECEIVED
2017 APR 24 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195

REFERENCE : 608468 4813078

AUTHORIZATION :

COST LIMIT :

\$ 25.00

ORDER DATE : April 20, 2017

ORDER TIME : 10:23 PM

ORDER NO. : 608468-260

CUSTOMER NO: 4813078

CHANGE OF AGENT

NAME: DISNEY HUMAN RESOURCES
STRATEGIES AND SERVICES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS: _____

FILED
SECRETARY OF STATE
TALLHASSEE, FLORIDA
17 APR 24 AM 9:14

**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 Human Resources Strategies and Services, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

500 South Buena Vista Street

Burbank, CA 91521

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

500 South Buena Vista Street

Burbank, CA 91521

04/10/2015

3. Date of filing/registration in Florida

M15000002627

4. Document number

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

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

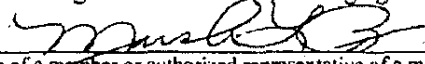
Margaret C. Giacalone

NEW Registered Office Address:

1375 East Buena Vista Drive, 4th Floor North

Lake Buena Vista, FL 32830

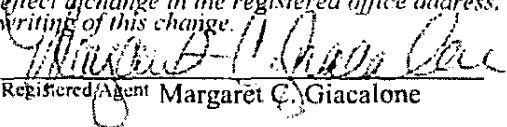
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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

Marsha L. Reed, Secretary

Printed or typed name of signee

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.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 APR 24 AM 9:14