(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



700298244587

APR 2 5 2017

Y SULKER

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195									
REFERENCE : 608468 4813078									
AUTHORIZATION: The Bleen and Authorization :									
COST LIMIT : \$ 25.00									
ORDER DATE : April 20, 2017									
ORDER TIME: 10:24 PM									
ORDER NO. : 608468-255									
CUSTOMER NO: 4813078									
CHANGE OF AGENT									
NAME: DISNEY FINANCIAL SERVICES, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Melissa Zender									

EXAMINER'S INITIALS:

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.

ì.	Na	une of the limited liability company: Disney Financi	al Servic	es, LLC				
2.	(a)		ć	b)	**			
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		~ <i>J</i>	Mailing address of limi (Nate: MAY BE PO			
		500 South Buena Vista Street	*****	500 Sout	th Buena Vista Stre	et		
		Burbank, CA 91521	_	Burbank	, CA 91521			
		04/20/2015		M150000	03098			
3.		Date of filing/registration in Florida	4.		Document number	•		
·5.	(a)							
	` ,	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State	97			
		Jeffrey S. Craigmile						
		Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS	27	-			
		1375 East Buena Vista Drive, 4th Floor North						
				,	-			
		Lake Buena Vista`, FL	32830)	_	_		
	/L\					<u> </u>	-	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	_		APR	
		Margaret C. Giacalone				50 : 20 : 10 : 1	ት ሁን	٠
		NEW Registered Office Address:			-	(~) <u>:</u> .	200	i je e
		1375 East Buena Vista Drive, 4th Floor North					640	
		TOTAL CONTROL VICE DIVIDE AND THOUSE			•	1.080.0	C I	•
		Lake Busine Vista				**	Ver	
		Lake Buena Vista , FL	32830		-			
the ago wa	cha ent w s/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 li- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi- ability co of the lim	stered office ompany, it is lited liability	and the business of hereby confirmed company or as of	ffice of that the	the reg	istered e(s)
		Much	Mar	sha L. Reed	<u> </u>			
	_	ure of a member or authorized representative of a member			· Printed or typed name	_		
pro the to i not	obli nere ifiea	ny accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provide ty reflect a change in the registered office address, I in writing of this change. The of Registered Alent Margaret C. Giacalone.	ree to act perform d for in (hereby co	in this capa ance of my a Chapter, 605 Onfirm that	acity. I further agri luties, and I am fan , F.S. Or, if this do the limited liability,	ee to con niliar wi cument compan	nply with and is bein y has b	th the accept g filed seen
			_					

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

ŕ