

M22000004458

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

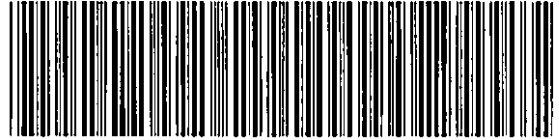
(Business Entity Name)

(Document Number)

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ALACHASSEE COUNTY

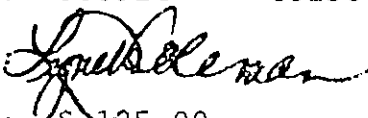
FILED

2022 MAR 24 PM 12:04

CLERK OF STATE
TALLAHASSEE, FLORIDA

T. LEMIEUX
MAR 24 2022

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

ACCOUNT NO. : I20000000195
REFERENCE : 568924 4813078
AUTHORIZATION 
COST LIMIT : \$ 125.00

ORDER DATE : March 23, 2022
ORDER TIME : 5:24 PM
ORDER NO. : 568924-045
CUSTOMER NO: 4813078

FOREIGN FILINGS

NAME: DISNEY STREAMING ENTERPRISES
SERVICES CO., LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Disney Streaming Enterprises Services Co., LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DE

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(FEI number, if applicable)

upon filing

4.

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 500 South Buena Vista Street

(Street Address of Principal Office)

6.

500 South Buena Vista Street

(Mailing Address)

Burbank CA 91521

Burbank CA 91521

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

Corporation Service Company

Office Address:

1201 Hays Street

Tallahassee

(City)

, Florida

32301

(Zip code)

FILED
2022 MAR 24 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Registered agent's acceptance:

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 application, 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.

Corporation Service Company

By:

Eylina Bahar
Assistant Vice President

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input type="checkbox"/> Manager	Name: Disney Services Holding Co. LILC	<input type="checkbox"/> Manager	Name: _____
<input checked="" type="checkbox"/> Member	Address: 500 S. Buena Vista St.	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	Burbank CA 91521	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Signature of an authorized person

Chakira H. Gavazzi

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DISNEY STREAMING ENTERPRISES SERVICES CO., LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-THIRD DAY OF MARCH, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DISNEY STREAMING ENTERPRISES SERVICES CO., LLC" WAS FORMED ON THE NINTH DAY OF AUGUST, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

6154655 8300

SR# 20221131745

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202989766

Date: 03-23-22



The WALT DISNEY Company

Office of the Corporate Secretary

March 21, 2022

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Disney Streaming Enterprises Services Co., LLC consent letter

To Whom It May Concern:

As Vice President, Governance Administration and Assistant Secretary of The Walt Disney Company (the "Company"), I authorize and approve, on behalf of the Company, the authorization for Disney Streaming Enterprises Services Co., LLC request to use the word "DISNEY" as part of the business entity name.

If you have any questions, please do not hesitate to contact the Company's Corporate Secretary's office at corp.secretary@disney.com.

Regards,

A handwritten signature in black ink, reading "Chakira H. Gavazzi". The signature is written in a cursive, flowing style.

Chakira H. Gavazzi
Vice President of Governance Administration & Assistant Secretary