## P07000118825

(Requestor's Name)					
(Address)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
☐ PICK-UP ☐ WAIT ☐ MAIL					
(Business Entity Name)					
(Decument Number)					
(Document Number)					
Certified Copies Certificates of Status					
····					
Special Instructions to Filing Officer:					

Office Use Only



000369802330

ALLARASSEE TEC

RECTIVE S

7921 C 1 - 5 AM 9: 50

LCT Vibrai

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

ACCOUNT NO. : 120000000195  REFERENCE : 029213 4813078  AUTHORIZATION : 535.00				
ORDER DATE : September 23, 2021				
ORDER TIME : 1:50 PM				
ORDER NO. : 029213-027				
CUSTOMER NO: 4813078				
<u>CHANGE OF AGENT</u>				
NAME: DISNEY LIVING DEVELOPMENT, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  CERTIFIED COPY  XX PLAIN STAMPED COPY				

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation organ sets above its registered office or register.	nized under the law	s of the State of FL		
	er to change its registered office or registe the corporation: DISNEY LIVING DEVEL	·	i, in the state of riorida.		
	office address: 215 CELEBRATION PLA		ON FI 34747		
2. The principal	office address:	TOE OLLLESTS (TVC			
3. The mailing a	address (if different): 500 S BUENA VIST	A ST BURBANK,	CA 91521		
	poration/qualification: 10/30/2007		umber: P07000118825		
	d street address of the current registered a rtment of State: (If resigned, enter resigne		I office on file with the		
	GIACALONE, MARGARET C				
	1375 BUENA VISTA DRIVE, 4TH FLOOR NORTH				
	LAKE BUENA VISTA	FL	32830		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Corporation Service Company					
	1201 Hays Street		79		
	P.O Box NOT acceptable				
	Tallahassee	FL	32301		
The street address changed will	ess of its registered office and the street be identical.	address of the bus	iness office of its registered agent.		
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been no	l by its board of di tified in writing o	rectors or by an officer so of the change.		
Xiel	2 aoni	Jill Cilmi Vice Pr	esident 7 7 7 6		
Signatu	re of an officer or director		d or typed name and title		
I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all state of land accept the oblining filed merely to reflect a change in the been notified in writing of this change.  Service Company	utes relative to the igation of my posi e registered office	his capacity.  proper and complete performance tion as registered agent. Or, if this address, I hereby confirm that the		
By: )	a Cation !	09/23/2021			
	nature of Registered Agent		Date		
If signing on be	half of an entity:				
	Asst. Vice President  yped or Printed Name				

\* \* \* FILING FEE: \$35.00 \* \* \*