(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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·					

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1.PR 25 2017 R. WHITE

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

ACCOUNT NO. : 12000000195				
REFERENCE : 608468 4813078				
AUTHORIZATION: Squelle Man				
COST LIMIT : \$35.00				
ORDER DATE: April 20, 2017				
ORDER TIME: 9:51 PM				
ORDER NO. : 608468-050				
CUSTOMER NO: 4813078				
CHANGE OF AGENT				
NAME: DISNEY VACATION DEVELOPMENT, INC.				
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 CORPORATIONS

statement of cha	nge is submitted for a corporation	17.0502, 607:1508, or 617.1508, Florida Statut organized under the laws of the State of Florid	<u>a</u>	
	2	registered agent, or both, in the State of Florid	a.	
1. The name of t	he corporation: Disney Vacation D	evelopment, inc.		
2. The principal	office address: 11390 Celebration	Boulevard, Celebration, FL 34747		
3. The mailing a	ddress (if different): 500 South Bu	ena Vista Street, Burbank, CA 91521		
4. Date of incorp	poration/qualification: 11/20/1990	Document number: \$13764		
	street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file with the esigned)	:	
	Jeffrey S. Craigmile			
	1375 East Buena Vista Drive, 4th	Floor North	学课 二	
	Lake Buena Vista	FL 32830	10	
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered office		
	Margaret C. Giacalone	And the second s	- 5 - 5	
	1375 East Buena Vista Drive; 4th Floor North			
		ox NOT acceptable		
	Lake Buena Vista	FL 32830.		
The street addre	ess of its registered office and the be identical.	street address of the business office of its regi	stered agent,	
Such change wa authorized by th	is authorized by resolution duly ac the board, or the corporation has be	lopted by its board of directors or by an office en notified in writing of the change.	r șo.	
والمستعل	Minsty of the state of the stat	Marsha L. Reed, Vice President and S	ecretary	
- Signatu	re of an officer or director	Printed or typed name and title		
I further agree is performance of agent. Or, if the hereby confirm	to comply with the provisions of a my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and complete and accept the obligation of my position as re to reflect a change in the registered office ada ified in writing of this change.	egistered Fess, I	
MINUL	ut Charack	4/7/2017		
	nature of Registered Agent	Date		
If signing on be	half of an entity:			
T;	yped or Printed Name			

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