513764

(F	Requestor's Name)				
(<i>p</i>	Address)				
(/	Address)	<u> </u>			
(0	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
(£	Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status	s			
Special Instructions to Filing Officer					
		;			

Office Use Only



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TO COL -5 MI 9: 50

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MIDOT-S PHOLO

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

ACCOUNT NO.	: I2000000195
REFERENCE	: 029213 4813078
AUTHORIZATION	Smellenan
COST LIMIT	: \$35.00
ORDER DATE : September 23, 20	21
ORDER TIME : 1:52 PM	
ORDER NO. : 029213-037	
CUSTOMER NO: 4813078	
CHANGE OF A	GENT
NAME: DISNEY VACATIONS.	ON DEVELOPMENT,
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Eyliena Baker	EXT#

EXAMINER:

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

statement of cha	provisions of sections 607.0502, 61 inge is submitted for a corporation in to above its resistance of the second	organized under the law	vs of the State of <u>F</u>	L		
1. The name of t	r to change its registered office or the corporation: DISNEY VACATIO	N DEVELOPMENT, IN	IC.	orida.		
2. The principal	office address: 215 CELEBRATION	N PLACE CELEBRATIO	ON, FL 34747			
3. The mailing a	ddress (if different): 500 S BUENA	VISTA ST BURBANK,	, CA 91521			
4. Date of incorp	poration/qualification: 11/20/1990	Document r	number: S13764			
	I street address of the current registement of State: (If resigned, enter re		d office on file witl	1 the		
	GIACALONE, MARGARET C					
	1375 EAST BUENA VISTA DRIV	/E, 4TH FLOOR NORT	⁻ H			
	LAKE BUENA VISTA	FL	32830			
6. The name and (if changed):	street address of the new registere	d agent (if changed) and	d /or registered offic	ce		
	Corporation Service Company					
	1201 Hays Street			-3		
	P.O Box NOT acceptable					
	Tallahassee	FL	32301	The same of the sa		
The street addre	ss of its registered office and the sbe identical.	street address of the bu	siness office of its	registered agent.		
Such change wa authorized by th	s authorized by resolution duly ac le board, or the corporation has be	lopted by its board of d en notified in writing o	lirectors or by an o	fficer soil		
Xie E	? Gonie	Jill Cilmi Vice Pr	resident	구림		
I further agree to of my duties, and document is being corporation has	e of an officer of director the appointment as registered age to comply with the provisions of a d I am familiar with and accept th ng filed merely to reflect a change been notified in writing of this ch n Service Company	ent and agree to act in t Il statutes relative to the e obligation of my posi e in the registered office	e proper and comp ition as revistered	olete performance agent. Or. if this		
By:) nn	ra Takuhi	09/23/2021				
If signing on be	half of an entity:		Date			
	Asst. Vice President					

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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