## 580694

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

Office Use Only



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2021 COT +5 //// 8: 31



DE POOR

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 029213 4813078

AUTHORIZATION

COST LIMIT : \$ 35.00

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ORDER DATE: September 23, 2021

ORDER TIME : 2:0 PM

ORDER NO. : 029213-056

CUSTOMER NO: 4813078

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CHANGE OF AGENT

NAME: THE CELEBRATION COMPANY

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	nge is submitted for a corpora	2. 617.0502, 607.1508. or 617.1508. Florida Statutes, thation organized under the laws of the State of FL e or registered agent, or both, in the State of Florida.	his	
1. The name of t	the corporation: THE CELEBR.	ATION COMPANY		
2. The principal	office address: 700 CELEBRA	TION AVE CELEBRATION, FL 34747		
3. The mailing a	address (if different): 500 SOU	TH BUENA VISTA STREET BURBANK, CA 91521-01	105	
4. Date of incom	poration/qualification: 09/17/1	1991 Document number: S80694	····	
	I street address of the current re timent of State: (If resigned, en	egistered agent and registered office on file with the tter resigned)		
	GIACALONE, MARGARET	С	2	
	1375 EAST BUENA VISTA	DR 4TH FLOOR NORTH	2021 GCT	
	LAKE BUENA VISTA	FL 32380	音 よ の	
6. The name and (if changed):	d street address of the new region	stered agent (if changed) and /or registered office	AH 6:	
	Corporation Service Compar	ny	$\frac{3}{2}$	
	1201 Hays Street			
		P.O. Box NOT acceptable		
	Tallahassee	FL 32301		
_		the street address of the business office of its registere		
Such change wa authorized by th	as authorized by resolution du ne board, or the corporation ha	ly adopted by its board of directors or by an officer so as been notified in writing of the change.	)	
Xie	2 ani	Jill Cilmi Vice President		
Signato		Printed or typed name and title		
If a ther agree to of my duties, an document is bei corporation has	the appointment as registered to comply with the provisions of I am familiar with and accent filed merely to reflect a chies been notified in writing of the Service Company	d agent and agree to act in this capacity. of all statutes relative to the proper and complete perpoper the obligation of my position as registered agent. ( ange in the registered office address, I hereby confirm is change.	formance Or, if this 1 that the	
By: Drac	· C-Kuble	09/23/2021		
-	nature of Registered Agent half of an entity:	Date		
Grace E. Kirbv.	Asst. Vice President			
	yped or Printed Name	<del>_</del>		

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