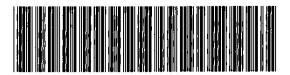
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(Req	uestor's Name)	
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DEPARTMENT OF STATE

APR 25 2017 C. M.CNAJR

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 608468 4813078

AUTHORIZATION STREET BELLENAN

COST LIMIT : \$ 35.00

ORDER DATE : April 20, 2017

ORDER TIME : 10:06 PM

ORDER NO. : 608468-015

CUSTOMER NO: 4813078

CHANGE OF AGENT

NAME: CELEBRATION REALTY, 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

Pursuant to the provisions of sections 607.0502, 617.0 statement of change is submitted for a corporation org		this 🛪	SIARC
in order to change its registered office or reg		PR	Sign
1. The name of the corporation: Celebration Realty, In	c.	12	25.50 C.50
2. The principal office address: 700 Celebration Avenue		3	15.55
		ŵ	A
3. The mailing address (if different): 500 South Buena	i Vista Street, Burbank, CA 91521	28	NO.
4. Date of incorporation/qualification: 09/17/1991	Document number: S80725		
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned.			
Jeffrey S. Craigmile			
1375 East Buena Vista Drive, 4th Flo	por North		
Lake Buena Vista	FL 32830		
6. The name and street address of the new registered at (if changed):	gent (if changed) and /or registered office		
Margaret C. Giacalone			
1375 East Buena Vista Drive, 4th Flo	oor,North		
	IOT acceptable		
Lake Buena Vista	FL 32830		
The street address of its registered office and the street as changed will be identical.			ıt,
Such change was authorized by resolution duly adopt authorized by the board, or the corporation has been resolution.	ed by its board of directors or by an officer so notified in writing of the change.)	
De Sunda Marin	Marsha L. Reed, Assistant Secretary		
I hereby accept the appointment as registered agent of I further agree to comply with the provisions of all steperformance of my duties, and I am familiar with and agent. Or, if this document is being filed merely to rehereby confirm that the corporation has been notified (Margaret C. Giaçalone)	atutes relative to the proper und complete I accept the obligation of my position as regis	tered s. I	
Mayard C. Craen Con	4/7/2017		
Signature of Registered Agent	Date		
If signing on behalf of an entity:			
Typed or Printed Name			
* * * FILING`F	FEE: \$35.00 * * *		