## F13000004641

(Re	equestor's Name)			
(Ad	ldress)	<u>.</u>		
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V HERRING APR 2 5 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 608468 4813078				
AUTHORIZATION: Simulation				
COST LIMIT : \$ 35.00				
ORDER DATE: April 20, 2017				
ORDER TIME : 10:11 PM				
ORDER NO. : 608468-160				
CUSTOMER NO: 4813078				
CHANGE OF AGENT				
NAME: ADVENTURES BY DISNEY TRAVEL SERVICES, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY				
CONTACT PERSON: Melissa Zender				
EXAMINER'S INTTIALS.				

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

statement of cha	inge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, the organized under the laws of the State of Delaware egistered agent, or both, in the State of Florida.	is	
	the corporation: Adventures by Disno	- · · · · · · · · · · · · · · · · · · ·		
2. The principal	office address: 190 Center Street Pr	romenade, Suite 1955, Anaheim, CA 92805		
3. The mailing a	ddress (if different): 500 South Buer	na Vista Street, Burbank, CA 91521		
4. Ďate of incorp	poration/qualification: 10/22/2013	Document number: F13000004641		
	street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file with the signed)		
	Jeffrey S. Craigmile			
	1375 East Buena Vista Drive, 4th F	Floor North		
	Lake Buena Vista	FL 32830		
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or registered office	2017 APR 24 AM D	
	Margaret C. Giacalone		R 24	
	1375 East Buena Vista Drive, 4th Floor North			
	P.O. Box Lake Buena Vista	NOT acceptable FL 32830	RATION	
The street addre	ss of its registered office and the str be identical.	reet address of the business office of its registered	l agent,	
Such change wa authorized by th	s authorized by resolution duly adop e board, or the corporation has beer	pted by its board of directors or by an officer so in otified in writing of the change.		
	mid A De	Marsha L. Reed; Secretary		
I further agree I performance of t agent. Or, if thi hereby confirm t	my duties, and I am familiar with ar s document is being filed merely to that the corporation has been notific	statutes relative to the proper and complete nd accept the obligation of my position as register reflect a change in the registered office address.	red I	
Will (V	Giacalone Una Olima	4/7/2017		
U	nature of Registered Agent	Date		
lf.signing on bel	ian or an entity:	•		
Ту	ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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