# 510411

Requestor's Name

PAZON & LARRINAGA LAW GROUP, P.A. Attorneys & Counselors At Law People's Plaza - Suite 14, 5025 E. Fowler Ave., Campa, FL 33617

Office Use Only

### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

|            | (Corporation Name) | (Document #)                    |              |
|------------|--------------------|---------------------------------|--------------|
| 2          |                    |                                 | -            |
| 3.         | (Corporation Name) | (Document #)                    | SECR<br>SECR |
|            | (Corporation Name) | (Document #)                    | AUG 10       |
| 4          | (Corporation Name) | (Document #)                    | PM I         |
| ☐ Walk in  | Pick up time       | Certified Copy                  | : 15         |
| ☐ Mail out | ☐ Will wait        | Photocopy Certificate of Status |              |

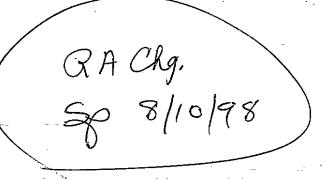
| Gelline<br>Gelline<br>Gelline | NEW FILINGS       |
|-------------------------------|-------------------|
|                               | Profit            |
|                               | NonProfit         |
|                               | Limited Liability |
|                               | Domestication     |
|                               | Other             |

| AMENDMENTS                            |
|---------------------------------------|
| Amendment                             |
| Resignation of R.A., Officer/Director |
| <br>Change of Registered Agent        |
| Dissolution/Withdrawal                |
| Метдет                                |

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|---------------|------------|
| -06/22/980    |            |
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| OTHER FILINGS    |
|------------------|
| Annual Report    |
| Fictitious Name  |
| Name Reservation |

| REGISTRATION/ QUALIFICATION |
|-----------------------------|
| <br>Foreign                 |
| Limited Partnership         |
| Reinstatement               |
| Trademark                   |
| Other                       |



Examiner's Initials



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 6, 1998

PAZOS & LARRINAGA LAW GROUP, P.A. PEOPLE'S PLAZA - SUITE 14 5025 E. FOWLER AVE. TAMPA, FL 33617

SUBJECT: PINARAMA BOWLING LANES, INC.

Ref. Number: 510411

We have received your document for PINARAMA BOWLING LANES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6909.

Velma Shepard Corporate Specialist

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Letter Number: 198A00036105



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 28, 1998

Pazos & Larrinaga Law Group, P.A. Peoples Plaza 4025 East Fowler Ave., Suite 14 Tampa, FL 33617-2192

SUBJECT: PINARAMA BOWLING LANES, INC.

Ref. Number: 510411

We have received your document for PINARAMA BOWLING LANES, INC. . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to file this document is \$35.

The current registered agent/office is as listed on the attached computer printout. Please correct this name and address in #4.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6901.

5/98

Susan Payne Senior Section Administrator

Letter Number: 498A00039593

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

| •  | provisions of section<br>poration organized u   |  |                                      |   | Florida Statutes, the  |
|--|---|--|--------------------------------------|---|--|
| <b>-</b>   |   | _  | <b>-</b>                             |   | agent, or both, in the   |
| State of Florida.  |   |  | ognored ogree                        |   | gon, or oon, mine  |
|  | he corporation is:  | PINARAMA                                   | BOWLING                              | LANES, IN   | c  |
|  |   |  |                                      |   |  |
| 2. The mailing a   | ddress of the corpora   |  |                                      |   | RY   |
| <del> </del>   |   | TAMPA                                      | , FLORIDA                            | 336//   | <u></u>  |
| 3. Date of incor   | poration/qualification  | n: 08/11/76                                | Docum                                | ent number:_                                      | 510411   |
| 4. The name and  | address of the curren   | nt registered agent                        | and office:                          |   |  |
|  | Lucki   | E E. PETTIT                                | <del></del>                          | <u> 45-15-11-11-11-11-11-11-11-11-11-11-11-11</u> |  |
| _  |   | MARJORY AVE                                |                                      | · ··  | 98 I   |
| _  | TAMPA   | , FLORIDA 3.                               | 3606                                 |   | SECRETABLE OF STATE OF STATE OF STATE OF CORPORATION OF CORPORATION OF STATE OF STAT |
| 5. The name and  | address of the new r  | egistered agent and                        | d office: (P. O.)                    | Box Not Acce                                      | ptable)  |
| _  | R. M.   | CHAEL LARR<br>GLARRINAGA LA                | INAGA                                |   | POR ST   |
| _  |   |  |                                      |   |  |
| _  |   | FOWLER AVEN                                | VE, SVITE 14                         | <u> </u>  | ज ह  |
| . <del>-</del>   | TAMPA   | , FL 33617                                 |                                      |   |  |
| The street addressent, as change                         | ess of its registered of<br>ed, will be identical.  | office and the stree                       | et address of th                     | e business off                                    | ice of its registered  |
| Such change wa<br>authorized by th                       | as authorized by resone board.  | olution duly adopt                         | ed by its board                      | of directors of                                   | or by an officer so  |
| 6  | James Herrell   | H)   |                                      | 7-,   | 16-98<br>Date)   |
| (Signature   | f an officer, chairman or   | vice chairman of the bo                    | pard)                                | <u> </u>  | Pate)  |
| JAMES HER  | RITT - VICE PA  | LESIDENT AND                               | SECRETARY                            | 7-  | 16-98<br>Date)   |
|  | (Printed or typed r   | name and title)                            | . ,                                  | (   | Date)  |
| corporation, I h<br>I further agree to<br>performance of | med as registered a<br>ereby accept the ap<br>to comply with the p<br>my duties, and I am | pointment as regis<br>rovisions of all sta | stered agent an<br>atutes relative i | d agree to act<br>to the proper t                 | t in this capacity.<br>and complete  |
| reğistered agent<br>N                                    |   | -  |                                      | . / /   | <b>a</b> .   |
|  | Mulan fame  | ent)                                       |                                      | 7/2//<br>(Date)                                   | 78   |
| If signing on behal                                      |   | •  |                                      | , ,   |  |
|  | MICHAEL LARRIN  | VAGA                                       | RE                                   | GISTERED A  | GENT   |
|  | Typed or Printed Name)  |  |                                      | (Capacity)  |  |