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LLC REGISTERED AGENT CHANGE THE GREAT ESCAPE ROOM PITTSBURGH LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursua submit Florida	ont to the provisions of sections 605.0114 or 605.01 s the following statement in order to change its	registerea office or re,	ne undersigned limited liability company gistered agent, or both, in the State of M PITTSBURGH LLC	
	ne of the Limited Liability Company:	TI ESCAPE ROOF	WI FIT TOBUNGH LLC	
2 (4)	525 WOODSTEAD COURT	љ\ 530 WO	ODSTEAD COURT	
∠. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Aniling address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	LONGWOOD, FL 32779	LONGW	OOD, FL 32779	
	1/19/2016		011729	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	MARTIN, GREGORY P			
	Registered Agent and Registered Office shown on the records	of the Florida Dept. of State		
•	530 WOODSTEAD COURT Registered Office Address (MUST BE FLORIDA STREET)	77 4NN PE (S)	2019	
	Registered Office Address <u>INVATER FLORING STREET</u>	ALVOROSSI	HAR .	
	LONGWOOD,	FL_32779	- 6 - 6 - 6	
(h)	Capitol Corporate Services, Inc.		PH 3: 55 SEFLORIDE	
(0)	Enter name of NEW Registered Agent and/or NEW Register	red Office address:	Logy &	
	515 East Park Avenue 2nd FI		· ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
	NEW Registered Office Address:			
٠	Tallahaana	32301		
		FL 32301	•	
the chi	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street o	of the registered office I liability company, it is is of the limited liabilit	s hereby confirmed that the change(s) y company or as otherwise provided in	
02	lando Castillo	Orlando Ca	estillo on behalf of the LLC	
Sign	iture of a member or authorized representative of a member		Printed or typed name of signes	
I here provis the obtomer notification	by accept the appointment as registered agent and lons of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address d in writing of this change.			
<u> </u>		nie Case, Assistai		
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00				

INHS18 (2/14)

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