

P17000067492

2018-12-12 12:57:56 CST

19542050845 From: Ranaas/McGraw

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H180003526303)))



H180003526303ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 280-3338
Fax Number : (954) 208-0845

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 DEC 12 PM 4: 28

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

REGISTERED AGENT CHANGE
GACP PREMIER SOCCER PARTNERS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RECEIVED

2018 DEC 12 PM 4: 06

SECRETARY OF STATE
TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 13 2018
C McNAIR

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GACPPremierSoccerPartners,Inc.

2. The principal office address: 2333 PONCE DE LEON BLVD, SUITE R240 MIAMI, FL 33134

3. The mailing address (if different): 2333 PONCE DE LEON BLVD, SUITE R240 MIAMI, FL 33134

4. Date of incorporation/qualification: 08/10/2017 Document number: P17000067492

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:(If resigned, enter resigned)

GBBP.LREGISTEREDAGENTS,LLC
100 ALMERIA AVE SUITE 340
CORALGABLES,FL33134

2018 DEC 12 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CTCorporationSystem
1200SouthPineIslandRoad
P.O. Box NOT acceptable
Plantation,Florida33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Natalie Pickens

Signature of an officer or director

Natalie Pickens, Secretary

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

CTCorporationSystem

By: Michele Holden
Signature of Registered Agent

12/12/2018
Date

If signing on behalf of an entity:

Michele Holden, Asst Sect
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)