I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

TD

SIGNATURE: KENNETH M. JACKSON

Electronic Signature of Signing Officer/Director Detail

Electronic Signature of Registered Agent

Officer/Director	Detail :
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SIGNATURE:

	Title	TD	Title	PD
	Name	JACKSON, KENNETH M	Name	SLAY, JERRY
	Address	530 MAGNOLIA LAKE DR	Address	14 FREDRICK DR
	City-State-Zip:	DEFUNIAK SPRINGS FL 32433	City-State-Zip:	DEFUNIAK SPRINGS FL 32433
	Title	VD	Title	D
	Title Name	VD JACKSON, DONNA	Title Name	D CASEY, PATRICK
	Name	JACKSON, DONNA 530 MAGNOLIA LAKE DR	Name	CASEY, PATRICK

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

KENNETH M. JACKSON 530 MAGNOLIA LAKE DR DEFUNIAK SPRINGS, FL 32433 US

Current Mailing Address:

DOCUMENT# 763454

530 MAGNOLIA LAKE DR DEFUNIAK SPRINGS, FL 32433

530 MAGNOLIA LAKE DR DEFUNIAK SPRINGS. FL 32433 US

Current Principal Place of Business:

FEI Number: 59-2237231

Name and Address of Current Registered Agent:

Entity Name: WALTON BRAVES SPORTS CLUB, INC.

FILED Feb 04, 2017 Secretary of State CC2813986020

Certificate of Status Desired: No

Date

02/04/2017

Date