

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000100528

**Entity Name:** PROOF OF PLAY, LLC

**Current Principal Place of Business:**

1960 US 1 SOUTH  
PMB 512  
ST AUGUSTINE, FL 32086

**Current Mailing Address:**

1960 US 1 SOUTH  
PMB 512  
ST AUGUSTINE, FL 32086

**FEI Number:** 27-1567526

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BRIAN ROWLAND, P.A.  
1010 EAST ADAMS STREET  
SUITE 233  
JACKSONVILLE, FL 32202 US

*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.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ROWLAND, RICHARD H  
Address P.O. BOX 56047  
City-State-Zip: JACKSONVILLE FL 32241

Title AUTHORIZED REPRESENTATIVE  
Name ROWLAND, BRIAN M ESQ.  
Address P.O. BOX 56047  
City-State-Zip: JACKSONVILLE FL 32241

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRIAN M. ROWLAND

**AUTHORIZED  
REPRESENTATIVE**

**04/15/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date