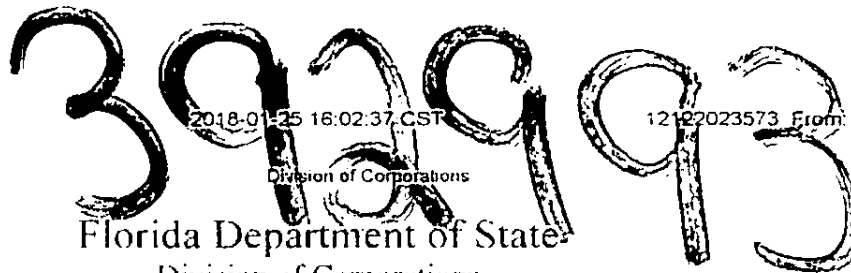


1/25/2018



2018-01-25 16:02:37 CST

12122023573 From: Kimberly Laughrey

Division of Corporations

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
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R. WHITE

JAN 26 2018

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DIVISION OF CORPORATIONS
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**REGISTERED AGENT CHANGE
ANGLER'S PARADISE OF BONITA SPRINGS, INC.**

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| Certificate of Status | 0 |
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**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 FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ANGLER'S PARADISE OF BONITA SPRINGS, INC.
2. The principal office address: 3895 STONERIDGE LANE
DUBLIN, OH 43017
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/20/1971 Document number: 392993
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)

R&A AGENTS, INC.

2320 FIRST STREET, SUITE 1000
FT MYERS, FL 3390

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

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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.

[Signature]
Signature of an officer or director

F. Ronald Sabatino, President
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.

C T Corporation System
By: *[Signature]*
Signature of Registered Agent

1/25/18

Date

If signing on behalf of an entity:
James M. Halpin
Assistant Secretary
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

CI02E045 (03/12)