542504

(Requ	uestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
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AUG 14 2015 I ALBRITTON



CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

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To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: August 11, 2015

Order#: 723634-024

Re: PGA TOUR, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.0502, 617.050 nge is submitted for a corporation organ r to change its registered office or regist	nized under the la	nws of the State of MD		
1. The name of t	he corporation: PGA TOUR, INC.				
2. The principal 100 PGA TC	office address: OUR BLVD, PONTE VEDRA BEACH, FL				
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 01/31/1979	Document	number: 842504	···	
	street address of the current registered a tment of State: (If resigned, enter resigned		ed office on file with the	9	
	BROWN, LEONARD D., JR.				
	100 PGA TOUR BLVD				
	PONTE VEDRA BEACH	FL	32082		
6. The name and (if changed):	street address of the new registered age	nt (if changed) ar	nd /or registered office	SECRETARY SIVISION OF CO	
	Corporation Service Company			G TO	
	1201 Hays Street			였고면	
	P.O. Box NOT	-	32301	5.5.1 Ha	
The street addre	ess of its registered office and the street be identical.	address of the bu	usiness office of its regi		
Such change wa authorized by th	s authorized by resolution duly adopted the board, or the corporation has been no	by its board of tified in writing	directors or by an office of the change.	er so	
0	0262		Dona Priebe, Vice President		
J	re of an officer or director the appointment as registered agent an		ed or typed name and title		
I further agree t performance of agent. Or, if thi hereby confirm	o comply with the provisions of all stati my duties, and I am familiar with and a is document is being filed merely to refl that the corporation has been notified in Nervice Company	utes relative to the accept the obligate ect a change in t	he proper and complete tion of my position as re he registered office ada	egisierea	
By: Dr	ace Cokubie	07/29/2015			
	half of an entity:		Date		
	Assistant Vice President				
	ped or Printed Name				

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