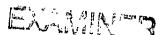
A11000000721

(Requestor's Name)			
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SECRETARY OF STATE
DIVISION OF CORPORATIONS



ACCOUNT NO. : 12000000195

REFERENCE : 034736

4328337

AUTHORIZATION :

COST LIMIT

ORDER DATE: December 21, 2011

ORDER TIME : 2:46 PM

ORDER NO. : 034736-005

CUSTOMER NO: 4328337

CHANGE OF AGENT

NAME:

ORLANDO PRO HOCKEY OPERATIONS,

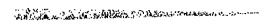
L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:



LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. Orlando Pro	o Hockey Operations, L.P.	
	Name of Limited Partnership or L	imited Liability Limited Partnership
2. 9-29-2011		3. A11000000721 Florida document number
Date of	filing/registration in Florida	Florida document number
4. The name of the Department of St.	he registered agent and the registere ate:	d office address as shown on the records of the Flori
	Cohen & Grigsby, P.C.	
	No	ame
	27200 Riverview Blvd.,	Suite 309
	Ado	dress
	Bonita Springs, FL 34134	4
	City, Stat	te and Zip
5. The name and I	Florida street address of the new reg	gistered agent and/or office:
	Christopher Heller	
	Na Orlando Sportsplex, Ltd 8701 Maitland Summit B	
	Florida street address (P	O. Box not acceptable)
	Orlando	FL 32810
	City, State	and Zip
6. Such change(s) is Signature of General	s/are effective when filed by the Fl Partner	orida Department of State.
comply with the prov	isions of all statutes relative to the han accept the obligations of my	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, position as registered agent,
Filing Fee: Certified Copy (o	\$35.00 ptional): \$52.50	