# A940000909

| (Requestor'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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Office Use Only



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01/14/13--01006--022 \*\*10.00

10/22/12--01048--001 \*\*315.00

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SEGRETARY OF STATE

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October 23, 2012

DANNA HAYDAR TAMPA BAY ARENA, L.P. 401 CHANNELSIDE DRIVE TAMPA, FL 33602

SUBJECT: LIGHTNING PROPERTIES, LTD.

Ref. Number: A9400000909

We have received your document for LIGHTNING PROPERTIES, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammi Cline Regulatory Specialist II

SECRETARY OF STATE

Letter Number: 612A00026027



Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Attn: Neysa Culligan

Re: Subject: Tampa Bay Arena, Ltd.; Lightning Properties, Ltd. Ref. No.: B95000000201; A9400000909 (respectively)

This correspondence is in response to your letter dated October 23, 2012 (Letter Number: 812A00025990).

The following documents are enclosed:

- Limited Partnership Statement of Change of Registered Agent: Tampa Bay Arena, Ltd.
- Check #001393- \$10.00
- Limited Partnership Statement of Change Registered Agent: Lightning Properties, Ltd.
- Check #001394- \$10.00

If there are any issues regarding the filing of these two documents please contact me. At (813) 301-6845.

Sincerely,

Danna Haydar

**Associate General Counsel** 

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#### **COVER LETTER**

| TO: Registration Section   |
|--|
| Division of Corporations   |
| SUBJECT: Lightning Properties Ltd.  Name of Limited Partnership or Limited Liability Limited Partnership   |
| A College Comment of Entitled Facilities Entitled Facilities in the College Co |
| DOCUMENT NUMBER: A 4400000   |
| The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.   |
| Please return all correspondence concerning this matter to:  |
| 6  |
| Danna Haydar   |
| Contact Person   |
| Tampa bay Arena LP   |
| Firm/Company   |
| 401 Channelside Drive  |
| Address  |
| Tampa, FL 33(00)   |
| City, State and Zip Code   |
| Maydar@tampabautimesforum.com  |
| E-mail address: (to be used for future annual report notification)   |
| For further information concerning this matter, please call:   |
| Danna Haydar at (813) 301-6845   |
| Name of Contact Person Area Code and Daytime Telephone Number  |
| Enclosed is a \$35.00 check made payable to the Florida Department of State.   |

#### STREET ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### **MAILING ADDRESS:**

Registration Section **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

## 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. 4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: 5. The name and Florida street address of the new registered agent and/or office: 6. Such change(s) is/are effective when filed by the Florida Department of State. Signature of General Partner 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 Lam familiar with an accept the obligations of my position as registered agent. Signature of Registered Agent

Filing Fee: \$35.00 Certified Copy (optional): \$52.50