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Change

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
1/3/14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 912169 7739920

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : December 6, 2013

ORDER TIME : 9:44 AM

ORDER NO. : 912169-030

CUSTOMER NO: 7739920

CHANGE OF AGENT

NAME: BATTLE ON, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS: _____

**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 Nevada _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BATTLE ON, INC.
2. The principal office address: 16506 POINTE VILLAGE DRIVE 201, LUTZ, FL 33558
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 02/10/2010 Document number: F10000000717

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)

THE LAW OFFICES OF NICK SPRADLIN, PLLC

18952 N DALE MABRY HWY SUITE 102

Lutz, FL 33548

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

Corporation Service Company

1201 Hays Street

Tallahassee P.O. Box NOT acceptable FL 32301

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 of an officer or director

DEBORAH A. BOHN

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.

By: 
Signature of Registered Agent

12-27-13
Date

If signing on behalf of an entity:

Sue G. Knight

Assistant Vice President

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

CR2E045 (03/12)

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