

FI1000000604

(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:

Office Use Only



200261295002

RA  
Change

FILED  
2011 JUN 23 PM 3:02  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
16 JUN 23 PM 1:51  
DIVISION OF CHILD SUPPORT

AR  
6/24/14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 186148 7848732

AUTHORIZATION :

*[Handwritten signature]*

COST LIMIT : \$ 35.00

ORDER DATE : June 20, 2014

ORDER TIME : 12:01 PM

ORDER NO. : 186148-190

CUSTOMER NO: 7848732

CHANGE OF AGENT

NAME: FANATICS RETAIL GROUP  
MISSISSIPPI, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Emily Gray

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Fanatics Retail Group Mississippi, Inc.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** F1100000604

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donna L. Smith

\_\_\_\_\_  
Name of Contact Person

Kynetic, LLC

\_\_\_\_\_  
Firm/Company

225 Washington Street, 3rd Floor

\_\_\_\_\_  
Address

Conshohocken, PA 19428

\_\_\_\_\_  
City/State and Zip Code

donna@kynetic.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Donna Smith

484

534-8103

at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

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

**Street Address:**

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

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

1. The name of the corporation: Fanatics Retail Group Mississippi, Inc.
2. The principal office address: 5245 Commonwealth Avenue, Jacksonville, FL 32254
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 2/10/11 Document number: F11000000604

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)

Ansbacher & Schneider, P.A.

5150 Belfort Road, Building 100

Jacksonville

FL 32256

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

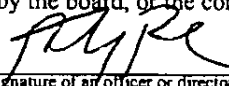
P.O. Box NOT acceptable

Tallahassee

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.

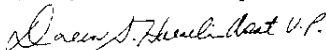
  
Signature of an officer or director

Thomas Baumlín

CFO

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.*



Signature of Registered Agent

June 23, 2014

Date

If signing on behalf of an entity:

Doreen S. Haeselin, Asst. VP

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)