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CORPORATION SERVICE COMPANY ACCOUNT NO. : I20000000195

REFERENCE : 186148

7848732

AUTHORIZATION

COST LIMIT :

ORDER DATE: June 20, 2014

ORDER TIME : 11:56 AM

ORDER NO. : 186148-150

CUSTOMER NO: 7848732

CHANGE OF AGENT

NAME:

FANATICS RETAIL GROUP

KENTUCKY, 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				
SUBJI					
	Name of Corporation				
DOCL	F11000000612 IMENT NUMBER:				
The en	closed 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 fur	ther information concerning this matter, please call:				
Donna	Smith 484 534-8103 at (
	Name of Contact Person Area Code & Daytime Telephone Number				
Enclos	ed is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Division of Corporations Clifton Building				
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				

CR2E045 (03/12)

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

statement of ch	hange is submitted for a c	07.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of Delaware and office or registered agent, or both, in the State of Florida.	_	
I. The name of	f the corporation: Fanation	s Retail Group Kentucky, Inc.		
2. The principa	al office address: 5245 Co	ommonwealth Avenue, Jacksonville, FL 32254		
3. The mailing	address (if different):			
4. Date of inco	orporation/qualification: 2/10/11 Document number: F11000000612			
	nd street address of the cu artment of State: (If resig	urrent registered agent and registered office on file with the med, enter resigned)	-1	
	Ansbacher & Schneid	er, P.A.	-	
	5150 Belfort Road, Bu	ilding 100	14 JUH 23	
	Jacksonville	FL 32256	. 7	
6. The name ar (if changed)	:	ew registered agent (if changed) and /or registered office	•	
	Corporation Service C	ompany		
	1201 Hays Street	BO Box NOT assembly		
	Tallahassee	P.O. Box NOT acceptable FL 32301		
The street addr as changed will	ress of its registered offi ll be identical.	ce and the street address of the business office of its registered age	ent,	
Such change wanthorized by	vas authorized by resolut the board, or the corpora	tion duly adopted by its board of directors or by an officer so tion has been notified in writing of the change.		
	TUNDE	Thomas Baumlin CFO		
I hereby accep I further agree	the of an officer or director of the appointment as rege to comply with the provi if my duties, and I am far his document is being fil in that the corporation he	ristered agent and agree to act in this capacity, visions of all statutes relative to the proper and complete miliar with and accept the obligation of my position as registered ad merely to reflect a change in the registered office address, I as been notified in writing of this change.	-	
Doen	S. Hereli act VP.	June 23, 2014	_	
	gnature of Registered Agent	Date		
Doreen S. H.	ehalf of an entity: aeselin, Asst. VP Typed or Printed Name			

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