F22 000 005538

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	#) MAIL
(Business Entity Nan	ie)
(Document Number) Certified Copies Certificates	of Status
Special Instructions to Filing Officer:	
J DE	NNIS
JAN RA	- 6 2023
Office Use On	у



700395268387

10/04/22--01012--004 **35.00

SECRE LARY OF STATE O

COVER LETTER

	Amendment Section Division of Corporat	ons
SURIE	CT: Soccer Partners A	nerica
Name of	f Corporation	
DOCUI	MENT NUMBER: F	22000005538
The enc	losed Statement of C	nange of Registered Office/Agent and fee are submitted for filing.
Please r	eturn all corresponde	nce concerning this matter to the following:
Justin M		
	f Contact Person	
	artners America	_
Firm/Co	ompany	-
	roxborough Park Rd	
Address		
Littleton	CO 80125	
City/Sta	te and Zip Code	
	jmiller@	rushsoccer.com
E-mail	address: (to be used	for future annual report notification)
For furtl	her information conce	rning this matter, please call:
JustinMi	ller	21 / 720 \ \4367703
	Name of Con	act Person at (720) 4367703 Area Code & Daytime Telephone Number
Enclosed	d is a \$35.00 check m	ade payable to the Department of State.
	Mailing Addre	
	Amendment Se	
	Division of Co	
	P.O. Box 6327	
	Tallahassee, F	L 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

		ections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ed for a corporation organized under the laws of the State of Florida	
		registered office or registered agent, or both, in the State of Florida.	
1. The name of	the cornoratio	Soccer Partners America INCORPORATED	
The principal office address		9665 N Roxborough Park Rd Littleton, CO 80125	
3. The mailing a	address (if diff	ereni):	
4. Date of incoη	poration/quali	Tication: 8/29/2022 Document number: F22000005538	
		s of the current registered agent and registered office on file with the : (If resigned, enter resigned)	
	Consuelo Sar	chez 1938 Duck Slough Blvd Trinity FL 34655	
6. The name and (if changed):	d street addres	s of the new registered agent (if changed) and /or registered office	
	Tiago Calvan	o - 14926 Hartford Run Dr Orlando FL 32828	
		P.O. Box NOT acceptable	
The street address changed will	ess of its regis be identical.	tered office and the street address of the business office of its registered agent,	
Such change wa authorized by the	as authorized he board, or the	by resolution duly adopted by its board of directors or by an officer so be corporation has been notified in writing of the change.	
Signatu	re of an officer or	Justin Miller - Chief Operaing Officer Printed or typed name and title	
I hereby accept I further agree of my duties, an document is bei	the appointm to comply wit id I am famili ing filed mere	ent as registered agent and agree to act in this capacity. In the provisions of all statutes relative to the proper and complete performance or with and accept the obligation of my position as registered agent. Or, if this ly to reflect a change in the registered office address, I hereby confirm that the I in writing of this change.	
Liasoulu	ing/	9.26.22	
If signing on be	nature of Register chalf of an ent		
T	yped or Printed N	me	
		* * * 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 (04/13)