

F95000000386

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

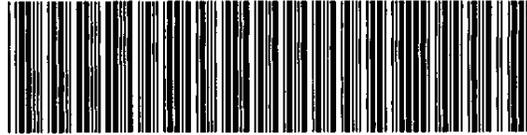
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS,
15 DEC 11 AM 7:59

DEC 15 2015

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WTA Tour, Inc.

Name of Corporation

DOCUMENT NUMBER: F95000000386

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:

Kristina Benson

Name of Contact Person

WTA Tour, Inc.

Firm/Company

100 Second Avenut South, Suite 1100-S

Address

St. Petersburg, FL 33701

City/State and Zip Code

legal@wtatennis.com

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

For further information concerning this matter, please call:

Kristina Benson

Name of Contact Person

at (**727**) **502-1244**

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

1. The name of the corporation: WTA Tour, Inc.
2. The principal office address: 100 Second Avenue South, Suite 1100-S
St. Petersburg, FL 33701
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 1/24/1995 Document number: F95000000386

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)

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

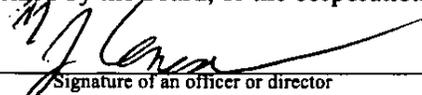
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Courtney McBride
100 Second Avenue South, Suite, 1100-S
P.O. Box NOT acceptable
St. Petersburg, FL 33701

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DIVISION OF CORPORATIONS
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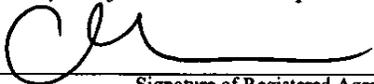
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Matthew Cenedella, Treasurer
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

December 8, 2015
Date

If signing on behalf of an entity:

Typed or Printed Name

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