## F95000005480

(Requestor's Name)						
(Address)						
(variess)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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SECRETARY OF STALE NLLAHASSEE, FLORIDA

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APPROVEL
AND
FILED

C. Courrence AUG 2 8 2007



TłON SERVI	CE COMPANY.					
		ACCOUNT NO.	:	072100000	032	
		REFERENCE	:	070939	4350637	
		AUTHORIZATION	:			
		COST LIMIT	:	\$ 35.00	Spuisole	RA
ORDER	DATE :	August 24, 2007				
ORDER	TIME :	9:27 AM				
ORDER	NO. :	070939-025				
CUSTOM	MER NO:	4350637				
		<u>CHANGE OF A</u>	GEN	<u>'I'</u>		
	NAME:	ATLANTA BRAVE	s s	PRING TRAI	NING	
PLEASE	RETURN	THE FOLLOWING AS	PR	OOF OF FIL	ING:	
XX	CERTIF: PLAIN :	IED COPY STAMPED COPY	•			
CONTAC	T PERSON	: Jeanine Reyno	lds			
		EX	AMI	NER'S INIT	IALS:	

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this unge is submitted for a corporation organized under the laws of the State of Georgia	
in order	er to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the	the corporation: ATLANTA BRAVES SPRING TRAINING CORP.	
2. The principal	office address: One CNN Center, Atlanta, GA 30303	
3. The mailing ac	address (if different): 755 Hank Aaron Drive, Atlanta, GA 30315	
4. Date of incorp	poration/qualification: 11/08/1995 Document number: F95000005480	
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State:	
	C T Corporation System	
	1200 South Pine Island Road	
	Plantation, FL 33324	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office  Corporation Service Company	
	1201 Hays Street  (P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agents be identical.	≥:
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board or the corporation has been notified in writing of the change.	<b>3</b> 3
They	Gregory J. Heller, Secretary	
I further agree t of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity.  If the appointment as registered agent and agree to act in this capacity.  If the appointment as registered agent and agree to act in this capacity.  If the appointment are complete performance to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the speen notified in writing of this change.	
Ву:  / ДД С	gnature of Registered Agent)  Output  Date:  Output	
If signing on be	chalf of an entity:	
	anoy, Assistant Vice President	
(T The secondoor	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 (8/05)