## 122375

(Requestor's Name)				
	(Address)			
(	(Address)			
	(City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				
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S. TALLENT SEP 2 7 2017

Mr. cx

FILED 17 SEP 26 PH 3: 15



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: September 25, 2017

Order#: 831163/060

Re: FIRST TEAM MANAGEMENT, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ashley Seeman c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of ch	ange is submitted for a corpo	802, 617.0502, 607.1508, or 617.1508, Flor tration organized under the laws of the State fice or registered agent, or both, in the State	e of FLORIDA
1. The name of	the corporation: FIRST TEAR	M MANAGEMENT, INC.	
2. The principa	l office address: 200 SW 1ST	AVENUE 14TH FLOOR FT. LAUDERDAI	.E, FL 33301
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification: 07/03	3/1986 Document number:	375
	id street address of the current artment of State: (If resigned,	t registered agent and registered office on fi enter resigned)	le with the
	BETHEL, ALISON E		, , , , , , ,
	200 SW 1ST AVENUE 141		SEP 25
	FORT LAUDERDALE	FL 33301	25
6. The name an (if changed):		gistered agent (if changed) and /or registere	ed office
	Corporation Service Comp	any	<u>u</u> n
	1201 Hays Street		
		P.O. Box. NOT acceptable	
	Tallahassee	Fl. 32301	<del></del>
The street addr as changed wil	ess of its registered office and I be identical.	nd the street address of the business office	of its registered agent,
Such change wanthorized by t	as authorized by resolution of the board, or the corporation	fuly adopted by its board of directors or by has been notified in writing of the change.	an officer so
	amark and	JAMES BENDER	PRESIDENT
Sherill	ure of an officer or director	Printed or typed name a	nd title
l further agree performance of agent. Or, if th hereby confirm	to comply with the provision f my duties, and I am familia his document is being filed m	ed agent and agree to act in this capacity, is of all statutes relative to the proper and r with and accept the obligation of my poserely to reflect a change in the registered en notified in writing of this change.	ilion as registered
	are t-Kuby	09/19/2017	
ទីរុ	gnature of Registered Agent	Date	
If signing on be	ehalf of an entity:		
GRACE E. KIF	RBY, ASST. VICE PRESIDEN	NT	
1	Typed or Printed Name	<del></del>	

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