LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State
04-22-2002 90165 014 ****50.00

DOCUMENT # L01000021516

1. Entity Name
Group of Champions, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6100 Payne Stewart Blvd	6100 Payne Stewart Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Windermere FL	City & State: Windermere FL
Zip: 34786 Country: USA	Zip: 34786 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3761455 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Tyler Piercy

Street Address (P.O. Box Number is Not Acceptable): 6100 Payne Stewart Blvd

~~Windermere~~

City: Windermere FL Zip Code: 34786

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE	Manager
NAME	Keith Ingersoll
STREET ADDRESS	4037 Conway Place Circle
CITY-ST-ZIP	Orlando, FL 34786
TITLE	Manager
NAME	Tyler Piercy
STREET ADDRESS	6100 Payne Stewart
CITY-ST-ZIP	Windermere, FL 34786
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CR2E083B (12/01)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Tyler Piercy Tyler Piercy Mgr 4/16/02 407-481-9309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #