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(C	ity/State/Zip/Phone	e #)		
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(Business Entity Name)				
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(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby gkirby3@cscinfo.com

Date: September 12, 2014

Order#: 288363/025

Re: IMG ACADEMIES GOLF & COUNTRY CLUB, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \underline{XX} Check in the amount of \$25.

Please take the following action:

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Grace Kirby c/o Corporation Service Company 2711 Centerville Road, Suite 400 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 LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Name of the limited liability company: <u>IMG ACAL</u>	DEMIES GOLF & C	OUNTRY CLUB, LLC
2 (2	a) 4350 El Conquistador Park	(b) _4	1350 El Conquistador Park
_ . (c	Principal office address of limited liability compan		Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)	•	(Note: MAY BE POST OFFICE BOX)
	Bradenton, FL 34210	Bra	adenton, FL 34210
	03/31/2005	LOS	5000031646
3.	Date of filing/registration in Florida	4.	Document number
<i>5 (</i>	(a) C T Corporation System		
5. ((a) C Corporation System Registered Agent and Registered Office shown on the reco	ords of the Florida Dept.	of State:
	1200 South Pine Island Road		
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	Plantation	FL 33324	
		_, 1 <u>B</u>	
a	b) Corporation Service Company		产 第二
(ı	Enter name of NEW Registered Agent and/or NEW Regi	stered Office address:	
	1201 Hays Street		がまめ
	NEW Registered Office Address:	<u>. </u>	
	<u>—</u>		
		· · · · · · · · · · · · · · · · · · ·	
	Tallahassee	, FL 32301	
If the	e limited liability company is not organized under the change or changes are made, the Florida street addresses	he laws of the State	e of Florida, it is hereby confirmed that after
agen	nt will be identical. Or, in the case of a Florida limi	ted liability compa-	ny, it is hereby confirmed that the change(s)
was/	were authorized by an affirmative vote of the membarticles of organization or the operating agreement of	bers of the limited	liability company or as otherwise provided in
uic a	articles of organization of the operating agreement c		
Cin		Dona Pri	ebe, Authorized Person Printed or typed name of signee
_	gnature of a member or authorized representative of a member		
prov the o to m notif	ereby accept the appointment as registered agent an eisions of all statutes relative to the proper and com obligations of my position as registered agent as pro erely reflect a change in the registered office addre fied in writing of this change.	iplete performance ovided for in Chap ess, I hereby confiri	of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed m that the limited liability company has been
	Stature of Registered Agent Corporation Service Compa		
Sign	nature of Registered Agent Corporation Service Compa	anv BY: Grace	E. Kirby, Assistant VP