L05000091358

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





700367919557



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: June 16, 2021

Order#: 854696/020

Re: UNDER ARMOUR RETAIL OF FLORIDA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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:Erika Zavala Daza 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.

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: UNDER ARMOUR RETAIL OF FLORIDA,						RIDA, LLC
2.	(a)	1020 Hull Street	((b)	1020 Hull	Street
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	(-)		(Note: MAY BE POST OFFICE BOX)
		Baltimore, MD 21230	-		Baltimore,	MD 21230
		09/15/2005		L	.050000913	358
3.		Date of filing/registration in Florida	4.	_		Document number
5.	(a)	C T CORPORATION SYSTEM				
		Registered Agent and Registered Office shown on the records of the Florida Dept. of St 1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			·	
		PLANTATION , FL	33324			202 Ser 7/
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	Office a	e address:	iress:	FILE PARY OF STALLAHASSEE
		NEW Registered Office Address:				
		1201 Hays Street				1: 30
		Tallahassee, FL	32301			
ch: agi	ange ent v is/we	mited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liam authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe bility of f the li	rec on mix	I office and npany, it is ted liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
_		Ziu E. Comi	Jili —	1 C		ized Person
In prothe to no	herei ovisi obl mere tified	or a complete of a member of a complete of all statutes relative to the proper and complete it is a complete of a complete of the proper and	ee to ac perforn I for in aereby c	et i nai Cl cor	n this capa	Printed or typed name of signee city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been