

**L05000102 609**

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(Address)

(Address)

(City/State/Zip/Phone #)

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**09 JUL 17 PM 3:17**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**D. BRUCE**

**JUL 20 2009**

**EXAMINER**

**24..7 SPORTS MANAGEMENT, LLC**

**485 Leucadendra Drive  
Coral Gables, Florida 33156**

June 16, 2009

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Change of Registered Agent  
24..7 Sports Management, LLC - Document #L0500010260  
JRW Holdings, LLC - Document #L07000091449  
JRW Holdings, Inc. - Document #P05000142196**

Dear Sir or Madam:

Enclosed with this letter, please find for filing the Form of Registered Agent and Registered Office for the above referenced companies. Also enclosed is a check in the amount of \$85.00 to cover the filing fees.

Thank you for your prompt attention to this matter.

Very truly yours,



Mirna Hormechea

Enclosures (4)

cc: Jeffrey Wechsler

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

09 JUL 17 PM 3:17

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 22, 2009

24..7 SPORTS MANAGEMENT, LLC  
ATTN: MIRNA HORMECHEA  
485 LEUCADENDRA DRIVE  
CORAL GABLES, FL 33156

SUBJECT: 24..7 SPORTS MANAGEMENT, LLC  
Ref. Number: L05000102609

We have received your document for 24..7 SPORTS MANAGEMENT, LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 309A00021126

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, 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: 24..7 Sports Management, LLC

2. (a) Principal office address of limited liability company: \_\_\_\_\_



(Note: **MUST BE STREET ADDRESS**)

485 Leucadendra Drive  
Coral Gables, FL 33156

(b) Mailing address of limited liability company: \_\_\_\_\_



(Note: **MAY BE POST OFFICE BOX**)

485 Leucadendra Drive  
Coral Gables, FL 33156

October 18, 2005

L05000102609

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Miami Center Registered Agents, LLC

Registered Office Address:

201 S. Biscayne Blvd.  
Suite 1700  
Miami, FL 33131

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**

**NEW** Registered Agent:

Jeffrey Wechsler

**NEW** Registered Office Address:

**(MUST BE FLORIDA STREET ADDRESS)**

485 Leucadendra Drive  
Coral Gables, FL 33156  
FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Jeffrey Wechsler

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00