## 10500120843

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J. LEGGETT

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## 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.	Na	me of the limited liability company: SUPERPLAY D	EVELOP	MENT GRO	OUP, LLC			
2 (	ัล)	1003 W. Indiantown Rd. Ste.210		1003 W	Indiantown Rd. Ste.210			
(w)		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
		Jupiter, FL 33458	<del></del> -	Jupiter, F	L 33458			
		12/16/2005		L0500012	0843			
3.		Date of filing/registration in Florida	4.		Document number	•		
5.	(a)	NRAI SERVICES, INC.						
٥.	(u)	Registered Agent and Registered Office shown on the records of	the Florida I	Dept. of State	::			
		1200 SOUTH PINE ISLAND ROAD						
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)					
		PLANTATION , FL	33324					
(b)	(b)	Corporation Service Company			is in	SECT.	18 f	¢.
		Enter name of NEW Registered Agent and/or NEW Registered	Office addr	<u>'ess</u> :		# <u>#</u>	B	FE.
						S2 25	12	
		1201 Hays Street				*** ( ) TI		
		NEW Registered Office Address:				FLORES	H 8: 32	
		Tallahassee , FL	32301					
the age was	cha nt w /we	mited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the S the registe ability con	ered office npany, it is ed liability	and the business of hereby confirmed company or as other	office of that the	the re chang	gistered ge(s)
		/S/ JILL CILMI	Jill Ci	lmi, Author	rized Person			
	_	rure of a member or authorized representative of a member			Printed or typed name	J		
I he pro the to n noti	erel visio obli iere fied	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the change in the registered office address, I have the change.	ee to act i performand for in Ch hereby cor	n this capa ice of my a iapter 605, ifirm that t	acity. I further agr luties, and I am far , F.S. Or, if this do the limited liability	ee to cor niliar wi cument compan	nply with and is being y has	vith the d accept ng filed been
Sign	natur	re of Registered Agent Corporation Service Company	BY: Gra	ace E. Kir	by, Assistant Vic	e Presid	ent	