LOBOCCE 4507

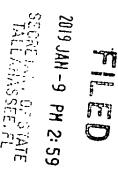
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)	_					
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status	_					
Special Instructions to Filing Officer:						

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FR SUPPLIES



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Logan Hall logan.hall@cscglobal.com

Date: January 7, 2019

Order#: 569879/005

Re: QWIKPIK GOLF 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:Logan Hall 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.

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. N	ame of the limited liability company: QWIKPIK GOLF	LLC		
2. (a)	10096 TAVISTOCK ROAD	(b)	10096 T	TAVISTOCK ROAD
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*,		Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	ORLANDO, FL 32827	_	ORLAND	O, FL 32827
	01/14/2008		L0800000	04507
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	he Florida!	Dept. of State	:
	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
	PLANTATION , FL	33324		2019 JAN SEGREDA TALLA
(b)	Corporation Service Company			THE REST.
` /	Enter name of NEW Registered Agent and/or NEW Registered (Office add	ess:	hin t nert
	1201 Hays Street			9 P
	NEW Registered Office Address:			2: 59
	Tallahassee . FL	32301		
the chagent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the regist bility cor f the limit	ered office npany, it is ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	/s/ Mary Spacone	Mary	Spacone, A	Authorized Person
~	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I he d in writing of this change.	e to act i performa for in Ci ereby coi	n this capa nce of my d napter 605, nfirm that t	acity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Signati	ire of Registered Agent Corporation Service Company	BY: Gr	ace E. Kirl	by, Assistant Vice President