

# L08000040544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

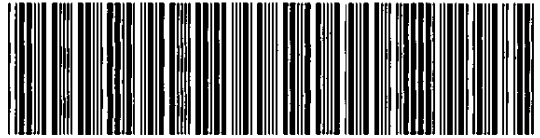
(Business Entity Name)

(Document Number)

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2009 SEP -9 PM 2: 00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

C. LEWIS  
SEP 10 2009  
EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BIRCO Holding Company LLC  
Name of Corporation

**DOCUMENT NUMBER:** L08000040544

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

D. Scott Poley  
Name of Contact Person

National Association of Professional Baseball Leagues  
Firm/Company

9550 16th Street North  
Address

St. Petersburg, Florida 33716  
City/State and Zip Code

spoley@MiLB.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott Poley at ( 727 ) 456 - 1714  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 24, 2009

D. SCOTT POLEY  
NATIONAL ASSOCIATION OF PROFESS BASEBALL  
9550 16TH STREET NORTH  
ST PETERSBURG, FL 33716

SUBJECT: BIRCO HOLDING COMPANY LLC  
Ref. Number: L08000040544

We have received your document for BIRCO HOLDING COMPANY LLC and your check(s) totaling \$35.00. 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 the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 309A00028470

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BIRCO Holding Company LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

D. Scott Poley  
Name of Person

Minor League Baseball  
Firm/Company

9550 16th Street North  
Address

St. Petersburg, FL 33716  
City/State and Zip Code

spoley@MiLB.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

D. Scott Poley at ( 727 ) 456-1714  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**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: BIRCO Holding Company, LLC

2. (a) Principal office address of limited liability company: 9550 16th Street North  
 **(Note: MUST BE STREET ADDRESS)** St. Petersburg, Florida 33716

(b) Mailing address of limited liability company: P.O. Box A  
 **(Note: MAY BE POST OFFICE BOX)** St. Petersburg, Florida 33731

4/22/08  
 3. Date of filing/registration in Florida

L08000040544  
 4. Document number

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

Registered Agent: D. Scott Poley  
 Registered Office Address: 201 Bayshore Dr SE  
St. Petersburg, FL 33701

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
**NEW Registered Agent:** D. Scott Poley  
**NEW Registered Office Address:** 9550 16th Street North  
**(MUST BE FLORIDA STREET ADDRESS)** St. Petersburg, FL 33716

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.

Pat O'Conner, President  
 Signature of a member or authorized representative of a member

Pat O'Conner, President  
 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.

D. Scott Poley  
 Signature of Registered Agent

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**  
**FILING FEE: \$25.00**

FILED  
 2009 SEP -9 PM 2:01  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA