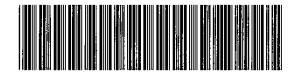
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O9 SEP -9 MHII: 10
SECRETARY OF STATE

D. BRUCE

SEP 10 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations		
	B Vero Beach LLC mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning the	his matter to the following:	
D. Scott Poley		
Name of Person		
Minor League Baseball Firm/Company		
9550 16th Street North Address	SECRE TALLAH	Ä
St. Petersburg, FL 33716 City/State and Zip Code	P-9 AMII: 10 TARY OF STATE ASSEE, FLORID	֡֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֜֓֓֓֓֓֓֓֓֓֜֜֜֜֓֓֓֓֜֜֜֜
spoley@MiLB.com E-mail address: (to be used for future annual report not	ORIDA ification)	•
For further information concerning this matter	, please call:	
D. Scott Poley Name of Person	at (727) 456-1714 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	



August 24, 2009

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

SUBJECT: MILB VERO BEACH LLC

Ref. Number: L09000041350

We have received your document for MILB VERO BEACH LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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: 109A00028512

O9 SEP -9 AMII: 10

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.

Name of the limited liability company:BIRCO Holding Company, LLC		
2. (a) Principal office address of limited liability con	npany: 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	
4/28/09	L0900041350	
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:	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: (MUST BE FLORIDA STREET ADDRESS)	9550 16th Street North St. Petersburg ,FL33716	
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 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		