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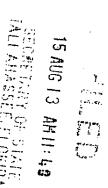
(Requestor's Name)				
(Address)				
(Address)				
(0	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT ☐ MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				





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08/13/15--01028--007 **25.00



AUG 1 4 2015 J SHIVERS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: August 11, 2015

Order#: 723634/031

Re: PRESIDENTS CUP EVENT MANAGEMENT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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:Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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: PRESIDENTS	CUP EVENT N	MANAGEMENT, LLC
2. (a)	PGA TOUR, INC.	(b)	
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	100 PGA TOUR BLVD.		
	PONTE VEDRA BEACH FL 32082		
	08/04/2009	L.09	000074784
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	BROWN, LEONARD D., JR		
5. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dept.	of State:
	· · · · · · · · · · · · · · · · · · ·		
	100 PGA TOUR BLVD. Registered Office Address (MUST BE FLORIDA STREET)	r Annpeggi	
	Registered Office Address	(ADDRESS)	Få ö
			<u> </u>
	PONTE VEDRA BEACH F	L 32082	AUG I
	, I	L_ <u>02002</u>	—— <u>Υ</u>
(b)	Corporation Service Company		
(0)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address:	ORID TO STATE
			22 5
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee F	rL32301	
	, i		
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered liability compar s of the limited l	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in
	126 2	Dona Prie	ebe, Authorized Person
Signa	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mei notifie	eby accept the appointment as registered agent and agent on so of all statutes relative to the proper and complete ligations of my position as registered agent as provided in the registered office address, addinguiting of this change.	le performance led for in Chapt I hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accep er 605, F.S. Or, if this document is being filed n that the limited liability company has been
Signat	ure of Registered Agent Corporation Service Company	BY: Grace	E. Kirby, Assistant Vice President

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