11000005104

(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:		
'JAN 1 5 2013		
L. SELLERS		

Office Use Only



000243438570

01/11/13--01002--010 **25.00

ECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ASK SPORTS MANAGEMENT, 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:		
JONATHAN BAKER		
Name of Person		
ABK SEORTS WANAGEMENT,	<u>uc</u>	
10101 US HWY WI N Address		
City/State and Zip Code		
Jestoaker & amail.com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
JONATHAN BAKER at (Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	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:ABK_Sect	RTS MANACEMENT, LLC
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	10101 US W IV PALMETTO FL,36221
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	PALMETTO FL, ZUBAI
JANUARY 12, 2011 3. Date of filing/registration in Florida	<u>L11000005104</u> 4. Document number
5. (a) Registered Agent and Registered Office shown on the	
Registered Agent:	ANDERSEN, DANIEL P
Registered Office Address:	FAIRFIELD, NS, 07004
(b) Enter name of NEW Registered Agent and/or NEV	W Registered Office address:
NEW Registered Agent:	BAKER, DONATHAN C. S.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10101 25 41 1
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fland the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise 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 a comply with the provisions of all statutes relative to the province of the appointment is being filed to me address, I hereby confirm that the limited liability company. Signature of Registered Agent	orida street address of the registered office ical. Or, in the case of a Florida linged was/were authorized by an affirmative vote of se provided in the articles of organization or
DIRTHING OF ITORISHOO VIRGIN	

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

₽., , ,