## 11000041508

(Requestor's Name)			
(Address)			
(Ad	dress)		
(Cit	y/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate:	s of Status	
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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section Division of Corporations		
CI /	A Compa Times 11 C	
	A Game Time, LLC	
Name of Li	mited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Or	ffice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning t	his matter to the following:	
Sandra Acklin		
Name of Person		
Her Favorite Team		
Firm/Company		
778 Scenic Gulf Drive, 223C		
Address		
Miramar Beach, FL 32550		
City/State and Zip Code	<del> </del>	
, ,		
elegemetime@eol.com		
Slagametime@aol.com  E-mail address: (to be used for future annual report notification)		
For further information concerning this matte	r, please call:	
Sandra Acklin	at ( 216 ) 548-2214	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301	·	
Enclosed is a check for the following	g 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.

Name of the limited liability company:	SLA Game Time, LLC
2. (a) Principal office address of limited liability company	778 Scenic Gulf Drive, 223C
(Note: MUST BE STREET ADDRESS)	Miramar Beach, FL 32550
(b) Mailing address of limited liability company:	778 Scenic Gulf Drive, 223C
(Note: MAY BE POST OFFICE BOX)	Miramar Beach, FL 32550
4-7-2011 3. Date of filing/registration in Florida	L 110041508
3. Date of Hiling/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	United States Corporation Agents, Inc
Registered Office Address:	13302 Winding Oak Court Suite A
	Tampa, FL 33612
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	V Registered Office address:  Sandra Acklin  778 Scenic Gulf Drive, 223C
(MUST BE FLORIDA STREET ADDRESS)	Miramar Beach ,FL 32550
If the limited liability company is not organized under the l confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other 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 a comply with the provisions of all statutes relative to the province and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to mend address, I hereby confirm that the limited liability company  Signature of Registered Agent	125 PH LASSEE.FLOR

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