

L11000113370

Florida Department of State

Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : BUSINESS FILINGS
Account Number : 105256001620
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Email Address: dennis@dennisclarkgolf.com

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**LLC REGISTERED AGENT CHANGE
DCGOLF, LLC**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

Fax Audit: H130000280923

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: DCGOLF, LLC

2. (a) Principal office address of limited liability company: 148 Tahiti St.,

(Note: MUST BE STREET ADDRESS)

Naples, Florida 34113

(b) Mailing address of limited liability company: 148 Tahiti St.,

(Note: MAY BE POST OFFICE BOX)

Naples, Florida 34113

10/4/2011

L11000113370

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:

CT CORPORATION SYSTEM

Registered Office Address:

1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324 US

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

Business Filings Incorporated

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

515 E. Park Avenue,

Tallahassee, FL 32301

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.

Dennis Clark
Signature of a member or authorized representative of a member

Dennis Clark

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.

Mark Williams
Signature of Registered Agent

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

INHS18 (05/08)

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