## L11000 132919

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

Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscqlobal.com

Date: June 19, 2020

Order#: 329937/001

Re: STADIUM 1 SOFTWARE, 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:Ashley Seeman c/o Corporation Service Company 251 Little Falls Drive 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 BOT LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability c submits the following statement in order to change its registered office or registered agent, or both. in the State of

1. N	ame of the limited liability company: STADIUM 1 S	SOFTWAF ————	RE, LLC		
2. (a)	1025 Gateway Blvd		(b) 1025 (	Gateway Blvd	
• ,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO.	
	#303-509		#303-5	509	
	Boynton Beach, FL 33426		Boynto	on Beach, FL 33426	
	11/22/2011		L11000	132979	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	GORDON, LEWIS G				
<i>5.</i> (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 7115 Rue Notre Dame				
	Registered Office Address (MUST BE FLORIDA STREE	~;			
				<u></u> =	
	Miami Beach	33141			
		FL	<del></del>		
(b)	Corporation Service Company				
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	1201 Hays Street			2	
	NEW Registered Office Address:				
	Tallahassee	g. 32301			
If the	limited liability company is not organized under the	FLlaws of th	e State of	Florida, it is hereby confirmed that	
chang agent was/w	e or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member cicles of organization or the operating agreement of the	he registe liability or s of the li	red office company, mited liab	and the business office of the regist it is hereby confirmed that the chang ility company or as otherwise provide	
/s/ [	/s/ Lewis Gordon		Lewis Gordon, Manager		
Signa	ature of a member or authorized representative of a member		<del></del>	Printed or typed name of signee	
provis the ob to mer notifie	thy accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provided rely reflect a change in the registered office address, and in writing of this change.	igree to a te perform ded for in I hereby	ct in this c nance of n Chapter ( confirm th	apacity. I further agree to comply vany duties, and I am familiar with and 505, F.S. Or, if this document is being the limited liability company has	
_	ure of Registered Agent E. Kirby, Asst. Vice President of Corporation Service Company				

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