Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H120001882363)))



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LLC REGISTERED AGENT CHANGE EXPERIMENTAL GAMEPLAY GROUP LLC

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B. BOSTICK

JUL 2 4 2012

EXAMINER

10r-52-5015 12:15

TO a

H120001882363

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: EXPERIMENT.	AL GAMEPLAY GROUP LLC
2. (a) Principal office address of limited liability compan	y: 2854 Mulford Ave.
(Note: MUST BE STREET ADDRESS)	Winter Park, Florida 32789
(b) Mailing address of limited liability company:	2854 Mulford Ave.
(Note: MAY BE POST OFFICE BOX)	Winter Park, Florida 32789
11/28/2011	L11000133544
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:	GRAY, KYLE P
Registered Office Address:	2854 MULFORD AVE
	WINTER PARK FL 32789
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	Business Filings Incorporated
NEW Registered Agent: NEW Registered Office Address:	Susiness Filings Incorporated
(MUST BE FLORIDA STREET ADDRESS)	T. I. 12201
•	Tallahassee ,FL 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be idealiability company, it is hereby confirmed that the changes of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member of substitution and the company of a member o	Florida street address of the registered office stical. Or, in the case of a Florida limited shows was/were authorized by an affirmative vote
Kyle Gray, Member / Printed or typed name of signee	·
I hereby accept the appointment as registered agent and comply with the provisions of all statules relative to the pi and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this document is being filed to m address. I hereby confirm that the limited liability compan	agree to act in this capacity. I further agree to roper and complete performance of my duties, asition as registered agent as provided for in erely reflect a change in the registered office my has been notified in writing of this change.

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

INHS18 (05/08)

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