L12000/09868

(Requestor's Name)			
(Address)			
(Address)			
(and a second s			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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SECRETARY OF SHATE.
OHVISION OF CORPORATIONS

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C. LEWIS

DEC 1 3 2012

EXAMINER

«COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Sports One Apparel 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:				
Mina Dix				
Name of Person				
Sports One Apparel Firm/Company				
3720 NW 43rd Street Suite 105 Address				
City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Name of Person at (352) 359-80109 Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations 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. Na	me of the limited liability company: Sports	One Apparel LLC
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	Canciville, Fl 32609
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	- 720 NW 23rd Arenue - Gairesville Fl 3249
3. Da	te of filing/registration in Florida	1. 12 00009868 4. Document number
5. (a)	Registered Agent and Registered Office shown on the	he records of the Florida Dept. of State:
	Registered Agent:	Niva Dix 巴製工
	Registered Office Address:	720 NW 235 dAVE > SEE
		Dinesville Fl. 3009 in
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
	NEW Registered Agent:	<u> </u>
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3700 NW 43rd STREET Suite 105. Gainesville ,FL 32606
and the liability the method of the option	limited liability company is not organized under the lamed that after the change or changes are made, the Flee business office of the registered agent will be identity company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise erating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited
	or typed name of signee	
I here compl and I i Chapt addres	by accept the appointment as registered agent and ag y with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my pos er 608, F.S. Or, if this document is being filed to mer ss, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

Signature of Registered Agent