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(Requestor's Name)						
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(Document Number)						
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14 APR 25 PM 1: 35 SECRETARY OF STATE TALL AHASSES, FLORID

C. LEWIS

MAY 5 2014

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJE	USA AMUSEMENTS GROUP, LLC						
COBOL		e of Limited L	iability Company				
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning thi	s matter to the	following:				
Brian	Watson						
	Name of Person		_				
Burr 8	& Forman LLP						
	Firm/Company		_				
200 S	South Orange Ave., Suite 800						
	Address		_				
Orlan	do, FL 32801						
	City/State and Zip Code						
bwats	son@burr.com						
Е	-mail address: (to be used for future ann	ual report notif	fication)				
For fur	ther information concerning this matter,	please call:					
Brian	Watson/Mary Davis	407	540-6684				
	Name of Person	_	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 allahassee, Florida 32314				
	Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ \$	55 Filing Fee & Certified Copy				
INHS18	8 (2/14)						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

	me of the limited liability company: USA AMUS						
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 9145 NARCOOSSEE RD, STE 106 - 197	(1	(b)				
	ORLANDO, FL 32827			IDO, FL 32827	012 100 - 107		
	1/11/2013		L130000	0003196			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	Registered Agent and Registered Office shown on the records of			_			
				te:	300 -		
	B&C CORPORATE SERVICES OF CENTRAL FLORIDA			_	APR ECRE		
	Registered Office Address (MUST BE FLORIDA STREET) 390 N ORANGE AVE, STE 1400		FILET PR 25 P RETARY I AHASSEI				
	· · · · · · · · · · · · · · · · · · ·			- -	25 PARY ASSE		
	ORLANDO , FI	22801		_			
					구 S 등 3		
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office ac	ldress:	-	貴語 の		
	and man of the second s	o o nice u			,		
	Burr & Forman LLP, Attn: Brian Watson						
	NEW Registered Office Address:						
	200 South Orange Ave., Suite 800			_			
	Orlando	_{L_} 32801					
		L <u></u>		_			
the cha agent v was/we	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited lear authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the reg liability c of the lir	istered offic ompany, it nited liabili	ce and the business offi is hereby confirmed that ity company or as other	ce of the registered at the change(s)		
		Bri	an Watso	on			
	ture of a member or authorized representative of a member			Printed or typed name of			
provisi the obl to mere	by accept the appointment as registered agent and agens of all statutes relative to the proper and completing igations of my position as registered agent as providely reflect a change in the registered office address, less in writing of this change.	gree to ac e perforn ed for in hereby c	et in this cap nance of my Chapter 60 confirm that	pacity. I further agree duties, and I am famil 15, F.S. Or, if this docu t the limited liability co	to comply with the iar with and accept ment is being filed impany has been		

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

Signature of Registered Agent