4. 1.7.3

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: GASSMAN, CROTTY & DENICOLO, P.A. Account Name

Account Number : 075350000514 : (727)442-1200 Phone

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LLC REGISTERED AGENT CHANGE HOMERUN DERBY BATS ONLY, LLC

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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.

ı.	Nε	me of the limited liability company: HOME RUN	DERBY	/ BATS ONLY, LLC		
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1245 COURT STREET		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 1245 COURT STREET		
		SUITE 102		SUITE 102		
		CLEARWATER, FL 33756-1/1/14	_	GLEARWATER, FL 33756 L13000177615		
3.		Date of filing/registration in Florida	4.	Document number		
5.	(a)	Registered Agent and Registered Office shown on the records of JEFFREY J. PENDINO Registered Office Address AUST BE FLORIDA STREET. 11705 BOYETTE RD., SUITE 228				
		RIVERVIEW	33569			
Enter name of NEW Registered Agent and/or NEW Registered Office address: ALAN S. GASSMAN, ESQUIRE NEW Registered Office Address: 1245 COURT STREET, SUITE 102				Establica Con Figure 1		
		CLEARWATER,FI	33756			
the ag wa the	e cha ent v is/we arti	imited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of organization or the operating agreement of the	ws of the f the regi ability co of the lin	e State of Florida, it is hereby confirmed that after stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company. AN S. GASSMAN, AS AUTH. REP.		
I in protection to no	here oviși obl mere tified	in writing of this mange.	ree to ac perform d for in hereby c	Printed or typed name of signee i'm this capacity. I further agree to comply with the cance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been		
Si	gnatu	re of Registered Agent				