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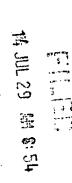
(Requestor's Name)					
(Address)					
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(Cit	ry/State/Zip/Phon	e #)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Na	me)			
(Document Number)					
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AUG 1 1 2014 C. CARROTHERS

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	The Athlete's Guide LLC	The Athlete's Guide LLC				
		of Limited Lial	pility Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office	Change and fo	ee(s) are submitted for filing.			
Please	return all correspondence concerning this r	natter to the fo	llowing:			
Lory A	Ankiel					
	Name of Person		-			
C/O F	Financial Life Management, Inc					
	Firm/Company		_			
570 E	ast Miller Ave					
	Address		-			
lowa,	LA 70647					
	City/State and Zip Code		-			
	@financiallifemgmt.com					
E	-mail address: (to be used for future annual	report notifica	ation)			
For fur	ther information concerning this matter, ple	ease call:				
Laura	Tillotson	337	582-4440			
	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	Regis Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 hassee, Florida 32314			
	Enclosed is a check for the following amount:					
	□ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy			

INHS18 (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.

1. 1	Name of the limited liability company: The Athlete	s Guide, LLC	,	74 JUL 29 AH 8: 55
2. (a)	(b)		
`	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			s of limited liability company:
	570 East Miller Ave	570	DEast Miller Av	'e
	Iowa, LA 70647	low	va, LA 70647	
	March 3, 2014	L140	000034829	
3.	Date of filing/registration in Florida	4.	Document i	number
5. (a	Registered Agents Inc			
J. (Registered Agent and Registered Office shown on the records o	f the Florida Dept.	of State:	
	Dan Keen			
	Registered Office Address (MUST BE FLORIDA STREET	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	3030 N Rocky Point Drive, STE 150A			
	Tampa	L 33607		
	, r	L		
(b	Lory Ankiel			
`	Enter name of NEW Registered Agent and/or NEW Registered	ed Office address:		
	NEW Registered Office Address:			
	8695 SE Compass Island Way			
	Jupiter , F	_L 33458	<u>.</u>	
the c	e limited liability company is not organized under the la hange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited l	of the registered	l office and the bus	siness office of the registered
was/v	were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	of the limited l	iability company o	or as otherwise provided in
	mankel	Lory An		
_	nature of a member or authorized representative of a member			ped name of signee
provi the o to me	reby accept the appointment as registered agent and as isions of all statutes relative to the proper and complete bligations of my position as registered agent as provide the profession of the registered office address, led in writing of this change.	gree to act in the e performance of led for in Chapt I hereby confirn	is capacity. I furth of my duties, and I er 605, F.S. Or, if n that the limited I	her agree to comply with the ' am familiar with and accept ' this document is being filed iability company has been
Sign	ture of Registered Agent			