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from:	Division of Corporatio							
\$rom.	Fax Number : (850)	617-6383						
r I Out :		:][
	Account Name : CORPO		TION INC.					
	Account Number : 11043 Phone : (561)		2					
	Fax Number : (561)		5					
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G	LLC REGISTERED AGENT CHANGE VPX SWIM AND SPORTS GEAR, LLC							
- 	VPX SWIM AND SPO	RTS GEAR, LLC						
· : -	VPX SWIM AND SPO	RTS GEAR, LLC						
- -	VPX SWIM AND SPO Certificate of Status Certified Copy	RTS GEAR, LLC	14 Q.4 1					

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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.

l. Na	me of the limited liability company:	I Sports	Gear,	цс						
	1600 North Park Drive			(b) 1600 North Park Drive						
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	(0)						
	Weston, FL 33326			Weston, 1	FL 33326	;				
	10/07/2014		1	.14000156	5751					
3. 5 (a)	Date of filing/registration in Florida JOHN H OWOC	4			Досши	darwa tasi	er			
5. (a)	Registered Agent and Registered Office shown on the records 1600 North Park Drive									
	Registered Office Address (MUST BE FLORIDA STREE	TADD	<u>RESS</u>				2020			
	Weston	FL	26			-				
(b)	Corporate Creations Network Inc.						۱ ۲	- 		
(0)	Enter name of NEW Registered Agent and/or NEW Registe	red Off	ice add	1531			σ	5		
	801 US Highway 1					· .	بب س			
	NEW Registered Office Address:			_		4				
	North Paim Beach	FL	108							
change	imited liability company is not organized under the c or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization, or the operating agreement of t	ne reg	ty cor e limi ited li	npany, it i ted liabili ability con	is hereby ty company.	y confirme any or as	ed that the otherwise	change(s)		
	/ Jull		Carlo	s M Alva	urez, Spe	cial Mana	nger			
Signa	nure of a member be antiquized representative of a member						me of signed			
I here provisi the ob- to mer notifie	by accept the appointment as registered agent and t ions of all statutes relative to the proper and comple ligations of my position as registered agent approvide ely reflect a change in the registered office padress d in writing of this change.	ngree (de perj ded fo //here	o act i forma r in C. by co	n this cap nce of my hapter 60 nfirm that	pacity. I duties, d 5, F.S. C t the limi	Jurther a and 1 am J Or, if this ited liabili	gree to con lamiliar w document ity compan	ith and accept ith and accept is being filed ty has been		

Signature of Registered Agent

Carlos M Alvarez, Special Secretary

Division of Corporationse P.O. Box 6327e Tallabassee, FL 32314 FILING FEE: \$25.00