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: (850)617-6383

From:

Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC

Account Number : I20070000020 Phone : (813)435-3176 Fax Number : (813)333-6358

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE OUTDOOR LIFE HOLDINGS 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.

. Na	me of the limited liability company: OUTDOOR LIFE	HOLI	DINGS LLC	
. (a)	24711 Harbour View Drive		(b) 24711 Har	rbour View Drive
. (=)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<del></del>		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Ponte Vedra, FL 32082	<b>~</b>	Ponte Vedr	rs, FL 32082
	08/27/2015		L150001447	761
	Date of filing/registration in Florida	4.		Document number
(a)	THE LAW OFFICE OF NICK SPRADLIN, PLLC			
	Registered Agent and Registered Office shown on the records of th	e Flor	ida Dept. of State	e: -
(b)	Registered Office Address (MUST BE FLORIDA STREET AD 2202 N WEST SHORE BLVD	DDRE	<u>:SS)</u> 	_
	STE 200 . FL	33607		
	THE LAW OFFICE OF NICK SPRADLIN, PLLC  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office	s address:	- 22
	4300 BISCAYNE BLVD.			- ;
	NEW Registered Office Address:			- H
	SUITE 203			<u> </u>
	MIAMI, FL_3	3157		
iange gent w as/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the mill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab	egiste ility the li mited	ered office and company, it is imited liability I liability comp	d the business office of the registered hereby confirmed that the change(s) y company or as otherwise provided in
Signat	ure of a member of authorized representative of a member			Printed or typed name of signee
ovisio e obli mere	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete plations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to a erfori for in creby	ct in this capa mance of my d Chapter 605, confirm that th	acity. I further agree to comply with the luties, and I am familiar with and account is being file in the limited liability company has been