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1/30/2018

Division of Corporations

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA00000023  
Phone : (614)280-3338  
Fax Number : (954)288-0845

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JAN 30 2018

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

Email Address: \_\_\_\_\_

LLC REGISTERED AGENT CHANGE  
GRAND SLAM SOCIAL, LLC

Certificate of Status	0
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Page Count	03
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18 JAN 30 AM 8:18  
TALLAHASSEE, FLORIDA

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J. LEGGETT  
JAN 31 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GRAND SLAM SOCIAL, LLC  
-----  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shona Rosenblum  
-----  
Name of Person

Grand Slam Social, LLC  
-----  
Firm/Company

185 Massachusetts Ave. Apt 801  
-----  
Address

Boston, MA 02115  
-----  
City/State and Zip Code

shona@grandslamsocial.com  
-----  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shona Rosenblum at ( 315 ) 527-0766  
-----  
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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, 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. Name of the limited liability company: GRAND SLAM SOCIAL, LLC

2. (a) 185 Massachusetts Ave. Apt 801 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Boston, MA 02115 (b) 185 Massachusetts Ave. Apt 801 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Boston, MA 02115

3. 01/25/2016 Date of filing/registration in Florida 4. L16000014528 Document number

5. (a) CLINE, ASHLEY Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 13726 Callington WELLINGTON, FL 33414 FL 33414

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation FL 33324

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member: [Signature] Shon Rosenblum Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: C T Corporation System [Signature] Brian Mueller Assistant Secretary

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