

3/1/2017

Division of Corporations

L1600016344B

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

****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
OPTIMUM HDD, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

RECEIVED

2017 MAR -1 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDAFILED
17 MAR -1 AM 8:57
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TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

D. SCOTT

MAR - 2 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OPTIMUM HDD, 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:

Name of Person

Firm/Company

Address

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at (_____) _____
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)

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TALLAHASSEE, FLORIDA

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: OPTIMUM HDD, LLC
2. (a) 13720 OLD ST. AUGUSTINE ROAD,
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
STE 8-194
JACKSONVILLE, FL 32258
- (b) P.O. BOX 362
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
ALPHARETTA, GA 30009
3. 08/31/2016
Date of filing/registration in Florida
4. L16000163448
Document number
5. (a) CORPORATION SERVICE COMPANY
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1201 HAYS STREET
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
TALLAHASSEE, FL 32301
- (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

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

Leslie Martin

Printed or typed name of signer

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 of Registered Agent

Kim Wasilewski
Assistant Secretary

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

INHS18 (2/14)

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Power of Attorney

NOTICE IS HEREBY GIVEN THAT BIG SHOOTER HOLDINGS LLC, incorporated under the laws of Georgia, does hereby appoint Christine Rein, Kelly Lettmann, Michelle Donato, Mandy Hendricks, Dareth Jeffers, Alan Stachura, Nicole Parnell, Sarah Revelle, Ryan Nelson, Ryan Maher, Erin Franceschi, Natalie Pickens, Michelle Buchheit, Jessica Molloy, Jeremy Puentes, Lars Fox, Matthew Sawyer, Shannon Diamond, Adam Steimel, Brad Slenker, Teah Martin, Lauren Miller, Stacey Busch, Tony Spain, JoAn Tolosa, Leslie Martin, Patricia Belanger, Karen Parker, Kimberly Bowens, Denise Bell, Kathy Fritz, Karen Fugelsang and Thomas Anderson, (but only for so long as each of them, respectively, remains an employee of CT Corporation or an affiliate thereof) as attorney-in-fact for the Company to act for the Company and affiliates and subsidiaries of the Company attached hereto as Exhibit A, specifically incorporated herein by reference ("the Subsidiaries") in the LLC and Subsidiaries' names for the limited purposes authorized herein.

The LLC and Subsidiaries hereby grant its attorney-in-fact the power to execute the documents necessary to file annual reports, annual registrations, license renewals, change entities' registered agent and registered office, and forms of similar import on behalf of the LLC and Subsidiaries in any state and the District of Columbia.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, all appointed persons listed above shall exercise the power of Vice President, Secretary, Manager, and/or Member.

This Power of Attorney expires when revoked by the LLC or Subsidiaries.

IN WITNESS WHEREOF the undersigned have executed this Power of Attorney on the 3 day of Feb, 2017.
Date Month Year

Signature of Member or Manager

Name Title (must be Member or Manager)

Sworn to and subscribed before me
 this 3rd day of February, 2017.
Date Month Year

Signature of Notary

Notary Public, State of Georgia

Commission Expires: 7/19/2020
MD/YY

Natasha Boclear
 Forsyth County, Georgia
 Notary Public
 My Commission Expires
 July 18, 2020

(Seal)

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Exhibit A
Subsidiaries of

(Reinstate any of the entities in black and make sure current with CT Corp as agent)

Big Shogter Holdings, LLC- COA to CT in GA

Bosse Bull Productions-needs to be active with CT Corp-GA

CLJM Farms, LLC-COA to CT Corp-GA

Double A Entertainment, LLC-needs to be active and with CT Corp GA

KC Holdings, Inc- withdrawn all units-AL, AZ, CA, CO, FL, GA, HI, KY, LA, MD, ME, MS, MO, NY, NC, OH, PA, SC, TX (at discontinued rate)

KCH Investments, LLC-this needs to be with CT Corp-GA

Midnight to 3am LLC-needs to be with CT Corp and reinstated-GA

Pathfinder Charities Inc.-needs to be with CT Corp-GA

Veteran Innovative Products LLC-needs to be with CT Corp-GA

OCB Ventures, LLC-needs to be active with CT Corp-GA

TLB Ventures, LLC-needs to be active and with CT Corp-GA

Songwriters in Paradise, LLC-needs to be active and with CT Corp-GA

Arrowds LLC-needs to be with CT Corp-TX

OPTIMUM HDD, LLC- needs to be active and with CT Corp-EL ADAMS

ENTERTAINMENT LLC- needs to be active and with CT Corp-FL and GA

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