

1/6/2014 10:34:42 From: 80613383

Division of Corporations

17030000002412

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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RE-SUBMIT

To:

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

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

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date of submission 1/2/14

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
STRIKE MIAMI, LLC

Certificate of Status	0
Certified Copy	0
Page Count	0304
Estimated Charge	\$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JAN - 7 AM 10:03

FILED

1/2/2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Strike Miami 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:

Rick Chung

Name of Person

c/o AMF Bowling Worldwide, Inc.

Firm/Company

222 West 44th Street

Address

New York, NY 10036

City/State and Zip Code

rchung@bowlmor-amf.com

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

For further information concerning this matter, please call:

Rick Chung

Name of Person

at 212 777-2214

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

850-617-6381

1/3/2014 2:10:58 PM

PAGE

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Fax Server



January 3, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

STRIKE MIAMI, LLC
215 PARK AVENUE SOUTH, SUITE 1800
NEW YORK, NY 10003

SUBJECT: STRIKE MIAMI, LLC
REF: M03000002412

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt
Regulatory Specialist II

FAX Aud. #: H14000000799
Letter Number: 914A00000171

RECEIVED
14 JAN -6 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE-SUBMIT

Please retain original filing
date of submission 1/2/14

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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: STRIKE MIAMI, LLC
2. (a) Principal office address of limited liability company: 222 W. 44TH STREET
(Note: MUST BE STREET ADDRESS) NEW YORK, NY 10036
- (b) Mailing address of limited liability company: 222 W. 44TH STREET
(Note: MAY BE POST OFFICE BOX) NEW YORK, NY 10036
3. Date of filing/registration in Florida: 7/16/2003
4. Document number: MO3000002412
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:	<u>CORPORATION SERVICE COMPANY</u>
Registered Office Address:	<u>1201 HAYS STREET</u> <u>TALLAHASSEE, FL 32301-2523</u>
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

<u>NEW Registered Agent:</u>	<u>CT CORPORATION SYSTEM</u>
<u>NEW Registered Office Address:</u>	<u>1200 SOUTH PINE ISLAND ROAD</u>
(<u>MUST BE FLORIDA STREET ADDRESS</u>)	<u>PLANTATION, FL 33324</u>

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

RICK CHAMBERLAIN, AUTHORIZED PERSON
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 608, 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: CT Corporation System

Signature of Registered Agent

Mark Brinkman
Vice President and Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (12/13)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JAN -2 AM 10:03

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