

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

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

From:

Account Name

: C T CORPORATION Account Number: FCA000000023 (850) 222-1092

Fax Number : (850)878-5368

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

2mail	Address:	 	 		 	

## LLC REGISTERED AGENT CHANGE STRIKE HOLDINGS LLC

Certificate of Status	0		
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January 7, 2014

FLORIDA DEPARTMENT OF STATE

STRIKE HOLDINGS LLC
215 PARK AVENUE SOUTH, SUITE 1800

NEW YORK, NY 10003

SUBSECT STRIKE HOLDINGS LLC

REF MO 60000 619

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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.

Please remove all reference to 608 in acceptance statement.

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.

Karen A Saly Regulatory Specialist II FAX Aud. #: H14000000803 Letter Number: 614A00000303

\*PE-SUBMIT\*
Please research date of suchnosion 12

## **COVER LETTER**

TO: Registration Section Division of Corporations

Strike Holdings 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.

222 West 44th Street

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 Telephane Number

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Taliahassee, Piorida 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

INH518 (12/13)

## 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 HOLDINGS, U.C. 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 9/27/2004 MO40000001019 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of Sta Registered Agent: CORPORATION SERVICE COMPANY Registered Office Address: 1201 HAYS STREET TALLAHASSEE, FL 32301-2575 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: **NEW** Registered Agent: CT CORPORATION SYSTEM والتعنيق **NEW** Registered Office Address: 1200 SOUTH PINE ISLAND ROAD (MUST BE FLORIDA STREET ADDRESS) 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

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.

Description 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)