

#109000001114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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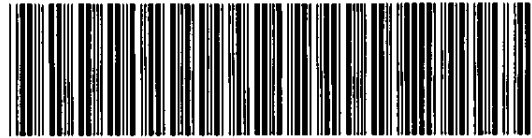
(Business Entity Name)

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K. SALY  
EXAMINER  
JAN - 8 2014



CORPORATION SERVICE COMPANY\*

ACCOUNT NO. : I20000000195

REFERENCE : 912169 7739920

AUTHORIZATION :

COST LIMIT :

\$25.00

A handwritten signature in dark ink, appearing to read "Susie Knight", is written over the printed text for authorization and cost limit.

ORDER DATE : December 6, 2013

ORDER TIME : 9:44 AM

ORDER NO. : 912169-020

CUSTOMER NO: 7739920

CHANGE OF AGENT

NAME: BATTLE ON, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
 PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS: \_\_\_\_\_

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

*Pursuant to the provisions of sections 608.416 or 608.508, 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: BATTLE ON, LLC

2. (a) Principal office address of limited liability company: 16506 POINTE VILLAGE DRIVE  
201  
LUTZ, FL 33558  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company: 16506 POINTE VILLAGE DRIVE  
201  
LUTZ, FL 33558  
*(Note: MAY BE POST OFFICE BOX)*

03/20/2009  
 3. Date of filing/registration in Florida

M09000001114  
 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
 Registered Agent: THE LAW OFFICES OF NICK SPRADLIN, PLLC  
 Registered Office Address: 18952 N. DALE MABRY HIGHWAY  
SUITE 102  
Lutz, FL 33548

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
NEW Registered Agent: Corporation Service Company  
NEW Registered Office Address: 1201 Hays Street  
*(MUST BE FLORIDA STREET ADDRESS)* Tallahassee, FL 32301

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.

Deborah A. Bohn  
 Signature of a member or authorized representative of a member

DEBORAH A. BOHN  
 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 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: Sue C. Knight Assistant Vice President  
 Signature of Registered Agent Corporation Service Company

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

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