771200005936

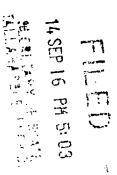
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(orginal de Lipit Hotto II)						
PICK-UP	☐ WAIT	MAIĻ				
(Busin	ess Entity Nar	ne)				
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to Filing Officer:						

Office Use Only



700264225467

09/16/14--01010--017 **25.00





CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby gkirby3@cscinfo.com

Date: September 12, 2014

Order#: 288363-106

Re: IMG LEARFIELD TICKET SOLUTIONS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Grace Kirby

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.	Na	me of the limited liability company: <u>IMG LEARFIELD</u>	TICKE	r solutio	DNS, LLC
2.	(a)	540 North Trade Street	(b)	540 No.	rth Trade Street
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Winston-Salem, NC 27101	-	Winston-S	Salem, NC 27101
3.		10/22/2012 Date of filing/registration in Florida	- 4	M1200000	
э.		Date of fitting/registration in Florida	4.		Document number
5.	(a)	C T Corporation System			
		Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State	::
		1200 South Pine Island Road			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					•
		Plantation , FL_	33324	-	TI SEP 16 PH
	(b)	Corporation Service Company			5 5 5
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice add	ress:	
		400411			
		1201 Hays Street NEW Registered Office Address:		<u> </u>	·
		Tallahassee , FL_	32301		
the ag wa the	e cha ent w is/we arti	imited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited of a member or authorized representative of a member	ne regist vility con the limi mited li	ered office mpany, it is ted liability ability com	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
	-	· ·	o to act	in this can	
pro the to no	ovisi obli mere tified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe igations of my position as registered agent as provided j ly reflect a change in the registered office address, I he I in writing of this change.	erforma for in C reby co	nce of my o hapter 605 nfirm that t	hetis, I just the raggee to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been
<u>C'</u>	:	Drace Z-Kuby	DV 6	***	l A L A L A L A L A L A L A L A L A L A
SI,	gnatui	•			by, Assistant VP
		Division of Cornerations P O Re	v 6377	Lallahac	COO HI {7{1/4

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