M1300000 7643

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								





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2019 SEP 10 PM 1: 2:

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Matthew Ermak matthew.ermak@cscglobal.com

Date: September 6, 2019

Order#: 902571-006

Re: EXTREME AMUSEMENT RIDES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Matthew Ermak c/o Corporation Service Company 251 Little Falls Drive 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

1 × 4 1 1 1

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	ame of the limited liability company: EXTREME AMUS	SEMEN	ΓRIDES, L	LC		
2.	(a)	7001 International Drive	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)				
		Orlando FL 32819	-	KISSIMM	1EE, FL 34746		72.1
		12/05/2013	_	M1300000	07643		
3.		Date of filing/registration in Florida	4.	•	Document number		
5.	(a)	C T CORPORATION SYSTEM					
٠.	(4)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of State	· : :		
		1200 SOUTH PINE ISLAND ROAD Suite 1400				2	
		Registered Office Address (MUST BE FLORIDA STREET AI	DDRESS)				- Fil
		PLANTATION FL_	33324		ćα·		
	(b)	o) Corporation Service Company					
	()	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Mice add	ress:		PH 1:29	
		1201 Hays Street					
		NEW Registered Office Address:					
			.	-			
		Tallahassee , FL_	32301				
the age was the III prothe	e cha ent w is/we e arti- signat herek ovisite obli- mere	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the still be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cless of organization or the operating agreement of the limited vote of a member or authorized representative of a member of a member or authorized representative of a member of a member of all statutes relative to the proper and complete particularly reflect a change in the registered agent as provided in writing of this change.	he regist oility con the limit mited lia <u>Jill Ci</u>	ered office npany, it is led liability com lmi, Author n this capa	and the business office hereby confirmed that is company or as otherwipany. rized Person Printed or typed name of signature. I further agree to duties and Lam tomilion	of the the chaise pro	registered ange(s) vided in
Si	gnatur		BY: Gra	ace E. Kirl	by, Asst. Vice Preside	nt	