

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H170002407203)))



H170002407203ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000030023
Phone : (512) 418-6949
Fax Number : (954) 208-0845

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
COMCAST SPECTATOR VENTURES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2017 SEP 13 AM 8:54

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

n SCOTT
SEP 13 2017

FAX COVER SHEET

TO

COMPANY

FAXNUMBER 18506176383

FROM Ranae McGraw

DATE 2017-09-07 15:33:23 CST

RE COMCAST SPECTATOR VENTURES, LLC

COVER MESSAGE

Chris Rickard
Senior Fulfillment Specialist
CT Corporation

Team (614) 280-3338
GlobalFulfillmentTeam@wolterskluwer.com

**Wolters Kluwer**

4400 Easton Commons Way Suite 125 Columbus, Ohio 43219
www.wolterskluwer.com

Confidentiality Notice: This email and its attachments (if any) contain confidential information of the sender. The information is intended only for the use by the direct addressee(s) of the original sender of this email. If you are not an intended recipient of the original sender, you are responsible for delivering the message to your person(s). You are hereby notified that any review, disclosure, copying, distribution or the making of any action in reliance on the contents of and attachments to this email is strictly prohibited. If you have received this email in error, please immediately notify the sender at the address shown above and permanently delete any copies of this email (digital or paper) in your possession.

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. Name of the limited liability company: <u>Comcast Spectacor Ventures, LLC</u>	
2. (a) <u>3601 S. Broad Street</u>	(b) <u>3601 S. Broad Street</u>
Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u>)	Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u>)
<u>Philadelphia, PA 19148</u>	<u>Philadelphia, PA 19148</u>
<u>03/28/2014</u>	<u>M14000002161</u>
3. Date of filing/registration in Florida	4. Document number
5. (a) <u>Dave Anderson</u>	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
<u>650 Okeechobee Blvd.</u>	
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
<u>West Palm Beach</u>	<u>FL 33401</u>
(b) <u>CT Corporation System</u>	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
<u>1200 South Pine Island Road</u>	
<u>NEW Registered Office Address:</u>	
<u>Plantation</u>	<u>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 member or authorized representative of a member

Philip I. Weinberg, President

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 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.

Signature of Registered Agent

MARGARET E. ROUTZAHN
Special Assistant Secretary

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