9/5/24, 10:58 AM

Division of Corporations

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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

Email	Address:			
CIUSTT	Auuress.			

LLC REGISTERED AGENT CHANGE ATHLETES FIRST, LLC

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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.

	une of the limited liability company: ATTEMENT 23091 MILL CREEK DRIVE		23091 MILL CREEK DRIVE					
2. (a)	Principal office address of hinted hability company:	{	Mailing address of limited liability company	:				
	(Note: MUST BE STREET ADDRESS)		(<u>Now: MAY BE POST OFFICE BOX</u>)					
	LAGUNA HILLS, CA 92653		LAGUNA HILLS, CA 92653					
	10/4/2016		M16000007917					
3.	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	- 4.	Document number					
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1201 HAYS STREET							
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	ESSI					
	TALLAHASSEE	32301-2	1-2525					
(b)	C T Corporation System	2024						
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	enddress: -5						
	NEW Registered Office Address:		:					
	1200 South Pine Island Road							
	Plantation, F1	33324	± 50					
the cha agent was/we the arti		f the reg ability c of the lit : limited	egistered office and the business office of the regis y company, it is hereby confirmed that the changet limited liability company or as otherwise provided ed liability company. Kathryn McBride	stere s)				
Signat	ture of a member or authorized representative of a member		Printed or typed name of signee					
provisi the obl. to merc	by accept the appointment as registered agent and agens of all statutes relative to the proper and completing it is a specific of my position as registered agent as providely reflect a change in the registered office address, I fin writing of this change. CT Corporation System 4 fixture Freques	ree to ac perforn ed for in hereby c	act in this capacity. I further agree to comply with ormance of my duties, and I am familiar with and a in Chapter 605, F.S. Or, if this document is being y confirm that the limited liability company has be	h the ecep filed en				

Signature of Registered Agent, Natalie Pickens, Assistant Secretary