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Division of Corporations

Fax Number : (850)617-6383

From:

ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053

Phone

: (561)694-8107

Fax Number : (561)694-1639

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LLC REGISTERED AGENT CHANGE WOMENS CLUB IP, 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 affice or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: WOMENS CLU 1. 1350 AVENUE OF THE AMERICAS			
Principal office address of limited liab	Principal office address of limited liability company. (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company. (Note: MAIBE POST OFFICE BOX)	
		C/O THE MADISON SQUARE GARDEN COMPANY	
		NEW YORK, NY 10121	
	04/06/2018	M18000003334	
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 1201 HAYS STREET		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	TALLAHASSEE FI	32301	
/kN	Corporate Creations Network Inc.		
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	
	11380 Prosperity Farms Road #221E		
	NEW Registered Office Address:		
	Palm Beach Gardens, F		
tha ol	thange or changes are made, the Plottan alvest such as well be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ricles of organization or the operating agreement of the	aws of the State of Florida, it is hereby confirmed that after of the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) sof the limited liability company or as otherwise provided in the limited liability company. Carlos M Alvarez, Attorney-in-Fact	
(! Will !		Printed or typed name of signee	
	nature of a member or authorized representative of a member reby accept the appointment as registered agent and a isions of all statutes relative to the proper and completibilizations of my position as registered agent as provided the proper and completibilizations of my position as registered office address,	gree to act in this capacity. I further agree to comply with the te performance of my duties, and I am familiar with and accept ded for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been	
ine o	ied in writing of this change. Carlos M Alvarez, S		