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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: CORPORATE CREATIONS INTERNATIONAL INC. Account Name

Account Number: 110432003053 : (561)694-8107 Phone : (561)694-1639 Fax Number

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## LLC REGISTERED AGENT CHANGE WOMENS CLUB HOLDINGS, 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

	ame of the limited liability company:	UB HOLDINGS, LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company. (Note: MAY BE POST OPFICE BOX)
	STE 710	C/O THE MADISON SQUARE GARDEN COMPAN
	NEW YORK, NY 10019	NEW YORK, NY 10121
	04/06/2018	M18000003335
3.	Date of filing/registration in Florida	4. Document number
5. (a)	CORPORATION SERVICE COMPANY	
( <u>a</u>	Registered Agent and Registered Office shown on the records of the 1201 HAYS STREET	he Florida Dept. of State.
	Registered Office Address (MUST BE FLORIDA STREET A	IDDRESS)
	TALLAHASSEE, FL	32301
<b>(</b> b)	Corporate Creations Network Inc.	Office address:
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:
	11380 Prosperity Farms Road #221E	in the second second
	NEW Registered Office Address.	
	Palm Beach Gardens	33410
the chagent was/v the ar	limited liability company is not organized under the laviange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the name of a member or authorized representative of a member	ws of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company.  Carlos M Alvarez, Attorney-in-Fact  Printed or typed name of signee
provi the of to me	sions of all stanties relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ted in Friting of this change.	performance of my duties, and I am familiar with and accept a for in Chapter 605, P.S. Or, if this document is being filed hereby confirm that the limited liability company has been
2	Carlos M Alvarez, Spe	ecial Secretary
Signa	ture of Registered Agent	