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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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

i. Nar	me of the limited liability company: SKY HIGH S	SPORTS NE	TWORK LLC
. (a) _	10925 SW Riverwood Rd	(b)	10925 SW Riverwood Rd
	Principal office address of limited liability company: (Note: MIST BE STREET ADDRESS)	. (-/,	Mailing address of limited liability company:
	Portland, Oregon 97219		(Note: MAFBE POST OFFICE BOX)
-		 -	Portland, Oregon 97219
·	8/20/2018	~ >	f1800000782 \$
	Date of filing/registration in Florida	- _{4.} -	Document mumber
(a) _	CT CORPORATION SYSTEM		
–	Registered Agent and Registered Office shows on the records of	the Florida De	pt. of State:
_	1200 SOUTH PINE ISLAND ROAD		
3	Registered Office Address	ADURESS)	
-	PLANTATION ,FI	33324	······································
(b) _	Business Filings Incorporated		· · · · · · · · · · · · · · · · · · ·
E	inter name of NEW Resistered Agent and/or NEW Resistered	Office addres	<u>:</u> :
	1200 South Pine Island Road		
Ī	NEW Registered Office Address:		
-	Plantation	33324	
-	FI , FI		
e chang ent wil is/were	nited liability company is not organized under the law ge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited li- e authorized by an additionative vote of the members of the of granization of the operating agreement of the	the register ability comp of the limited limit	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in ility company.
e:		Elizat	eth Kramer, Manager
hereby ovision e obliga merely	e of immuber of hithorized representative of a member of a member of a member of a member of all starties relative to the proper and complete alions of my position as registered agent as provide y reflect a change in the registered office address. It is writing of this change.	rea to act in performanc d for in Cha hereby confi	Printed or typed name of signes this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pier 80.5, F.S. Or, if this document is being filed orn that the limited Hability company has been
_	4 4		
4/21	Mark Williams, AVP, Busines	ss Filings Inc	orporated