## n10835

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Players Place Lakeside, Inc.
Name of Corporation

DOCUMENT NUMBER: N10835

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Guy M. Shir, Esq.

Name of Contact Person

Shir Law Group, P.A.

Firm/Company

1800 NW Corporate Blvd., Suite 200

Address

Boca Raton, FL 33431

City/State and Zip Code

gshir@shirlawgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Guy Shir

.561 ,95

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corporation	617.0502, 607.1508, or 617.1508, Florida Statutes, thi in organized under the laws of the State of Florida ir registered agent, or both, in the State of Florida.	<i>s</i>	
	the corporation: Players Plac	·		
2. The principal	office address: 700 E. Atlanto D Beach, FL 33060			
3. The mailing a	address (if different):			
4. Date of incor	poration/qualification: 12/01/2	Document number: N10835		<u> </u>
	d street address of the current regi rtment of State: (If resigned, enter	stered agent and registered office on file with the resigned)		
	Bogen Law Group, P.A			
	1900 Glades Road, Sui	te 300		
	Boca Raton, FL 33431			
6. The name and (if changed):	d street address of the new registe	red agent (if changed) and /or registered office		
	Guy M. Shir, Esq.		JAT L	14
	1800 NW Corporate Bo	oulevard, Suite 200	CRE CAH,	NOV 2
		Box NOT acceptable	AR'	2
		e street address of the business office of its registered	OF STATI	PH 7: 42
authorized by the	he board of the corporation has l	adopted by its board of directors or by an officer so been notified in writing of the change.	Ā	,,,
////////Signation	ne of an officer or director	Ricardo Silva, President		
I hereby accept I further agree performance of agent. Or, if th hereby confirm,	the appointment as registered a to comply with the provisions of my duties, and I am familiar wit is document is being filed merely that the corporation has been no	gent and agree to act in this capacity. all statutes relative to the proper and complete h and accept the obligation of my position as registe, to reflect a change in the registered office address, otified in writing of this change.	red I	
		October 17, 2014		
1	half of an entity:	Date		
1	yped or Printed Name	-		

\* \* \* FILING FEE: \$35.00 \* \* \*