

N14 600610759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

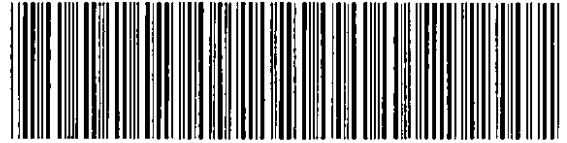
(Document Number)

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SPTS Baseball, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** N14000010759

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:

Elana Gollan  
Name of Contact Person

SPTS Baseball, Inc.  
Firm/Company

7360 SW 5th Street  
Address

Plantation / FL 33317  
City/State and Zip Code

E-mail address: (to be used for future annual report notification) sphspaladinbaseball@gmail.com

For further information concerning this matter, please call:

Elana Gollan at ( 954 ) 696-8610  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

22 8:23

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: SPTS Baseball, Inc.
- 2. The principal office address: 7360 SW 5th Street  
Plantation FL
- 3. The mailing address (if different): \_\_\_\_\_
- 4. Date of incorporation/qualification: 11/21/2014 Document number: N14000010759
- 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

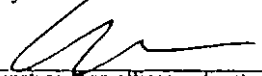
Erin Thomas  
6545 SW 20th Court  
Plantation FL 33317

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Vanessa Velocci  
9211 NW 17th Street  
P.O. Box NOT acceptable  
Plantation FL 33322

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Elana Gollan  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Vanessa Velocci  
Signature of Registered Agent

9/12/2023  
Date

If signing on behalf of an entity:  
Vanessa Velocci  
Typed or Printed Name



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 25, 2023

ELANA GOLLAN  
7360 SW 5TH STREET  
PLANTATION, FL 33317

SUBJECT: SPHS BASEBALL, INC  
Ref. Number: N14000010759

We have received your document for SPHS BASEBALL, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE REGISTERED OFFICE OF REGISTERED AGENT, OR BOTH, but your entity is a STATEMENT OF CHANGE OF REGISTERED OFFICE OR REISTERED AGENT OR BOTH FOR CORPORATION. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler  
Regulatory Specialist II

Letter Number: 823A00019835

SEP 22 2023