

PO2000069878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

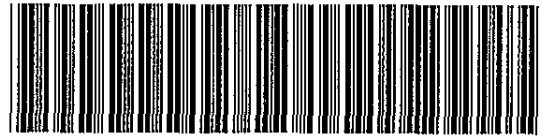
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Grand Slam Batting Cages of Tropical Park, Inc.  
(Name of corporation)

**DOCUMENT NUMBER:** P02000069878

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:

Ricardo Paez, Secretary  
(Name of person)

Grand Slam Batting Cages of Tropical Park, Inc.  
(Name of firm/company)

7900 Bird Road  
(Address)

Miami, FL 33156  
(City/state and zip code)

For further information concerning this matter, please call:

John Purifoy at ( 305 ) 992-2218  
(Name of 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  
409 E. Gaines Street  
Tallahassee, FL 32399

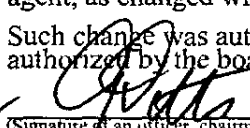
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED  
AGENT OR BOTH FOR CORPORATIONS**

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: Grand Slam Batting Cages of Tropical Park, Inc.
2. The principal office address: 7900 Bird Road  
Miami, FL 33156
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: June 25, 2002 Document number: P02000069878
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:  
Eric W. Boyer  
18302 SW 94th Ct  
Miami, FL 33157
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  
George F. Quintairos  
9200 South Dadeland Blvd, Suite PH-825  
(P.O. Box or personal mailbox NOT acceptable)  
Miami, FL 33156

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

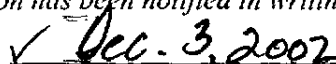
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
(Signature of an officer, chairman or vice chairman of the board)

George F. Quintairos, President  
(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.*

  
(Signature of Registered Agent)

  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:  
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314