(Requestor's Name)  (Address)	200131396522
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	06/18/0801010007 ++35.
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	2008 JUN 18 AM 8: 25 SECRETARY OF STATE TALLAHASSEE. FLORIDA

\*\*35.00

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: Signature Sports & Entertainment, Inc. (Name of Corporatio	n)
DOCU	UMENT NUMBER: P05000066908	<u>,</u>
	nclosed Statement of Change of Registered Office/Agent a	nd fee are submitted for filing.
Please	e return all correspondence concerning this matter to the fo	llowing:
	G. Alan Howard  (Name of Contact Pers	on)
	Milam Howard Nicandri Dees & Gillam (Firm/Company)	, P.A.
	14 East Bay Street (Address)	
	Jacksonville, FL 32202 (City/State and Zip Co	de)
For fur	orther information concerning this matter, please call:	
G. Ala	an Howard at (90 (Name of Contact Person)	357-3660 rea Code & Daytime Telephone Number)
Enclose	sed is a \$35.00 check made payable to the Department of S	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	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tange is submitted for a corporation organized under the laws of the State of Florida	
	ler to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of	f the corporation: Signature Sports & Entertainment, Inc.	
2. The principal	Il office address: 13000 Sawgrass Village Circle, Suite 34 Ponte Vedra Beach, FL 32082	
3. The mailing a	address (if different): 545 Granada Terrace Ponte Vedra Beach, FL 32082	
4. Date of incor	rporation/qualification: May 6, 2005 Document number: P05000066908	
	od street address of the current registered agent and registered office on file with the artment of State:	
	Milam Howard Nicandri Dees & Gillam, P.A.	
	50 North Laura Street, Suite 2900	
	Jacksonville, FL 32202 ZS	Marca San al
6. The name and (if changed):	Jacksonville, FL 32202  Id street address of the new registered agent (if changed) and /or registered office  TOTAL PROPERTY AND TOTAL PROPERTY AN	Charles Annual
1	Milam Howard Nicandri Dees & Gillam, P.A.	( )
	14 East Bay Street	
	(P.O. Box NOT acceptable)	
	Jacksonville, FL 32202	
The street addre	ress of its registered office and the street address of the business office of its registered agent, I be identical.	
	vas authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.    Sruce H. Lucker   CEO (Printed or typed name and title)	
C / (Sig	t the appointment as registered agent and agree to act in this capacity.  to comply with the provisions of all statutes relative to the proper and complete performance and familiar with and accept the obligation of my position as registered agent. Or, if this sing filed merely to reflect a change in the registered office address, I hereby confirm that the speen notified in writing of this change.  (Date)	
6.AL	Tuned or Printed Name)	

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