(Requ	uestor's Name)	
(Addı	ress)	
(Addı	ress)	<u>-</u>
(City/	State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nam	ne)
(Doce	ument Number)	,,,,,
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	





400134137334



08/11/08--01009--021 **35.00



400789,007D1,00671



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2008

John Prisco MMA Xtreme Fighting Promotions, Inc. 10509 North Nebraska Avenue, Unit 3 Tampa, FL 33647

SUBJECT: MIXED MARTIAL ARTS XTREME FIGHTING PROMOTIONS, INC.

Ref. Number: P07000079235

We have received your document for MIXED MARTIAL ARTS XTREME FIGHTING PROMOTIONS, 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):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 408A00046129

COVER, LETTER

SUBJECT: MIXED MARTIAL ARTS XTREME FIGHTING PROMOTIONS, INC. (Name of Corporation) DOCUMENT NUMBER: P07000079235 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: JOHN PRISCO (Name of Contact Person) MMA XTREME FIGHTING PROMOTIONS, INC. (Firm/Company) 10509 NORTH NEBRASKA AVENUE UNIT #3 (Address) TAMPA, FLORIDA 33647 (City/State and Zip Code) For further information concerning this matter, please call: JOHN PRISCO (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a \$35.00 check made payable to the Department of State. Street Address:
Amendment Section **Mailing Address: Amendment Section Division of Corporations Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

TO:

Amendment Section
Division of Corporations

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

	f the corporation: MMA XTREME FIGHTING PROMOTION			
-	al office address: 10509 NORTH NEBRASKA AVENUE UN	VIT #3	PROMOTI	MATTINE TO THE STATE OF THE STA
TAMPA, F	LORIDA 33647		promon	
3. The mailing	address (if different):			
4. Date of inco	orporation/qualification: 07-06-07 Document	number: P0	7000079235	Element
	nd street address of the current registered agent and register artment of State:	red office on f	file with the	· .
	ROBERT WARCHOLA			
	101 E KENNEDY BLVD SUITE 2800			FILL
			no.	2
	TAMPA, FLORIDA 33602			-
6. The name ar (if changed)	nd street address of the new registered agent (if changed) ar	nd /or register	red office	1:12
	nd street address of the new registered agent (if changed) ar	nd /or register	red office	1:12
	nd street address of the new registered agent (if changed) are:		red office	1: 12
	nd street address of the new registered agent (if changed) are: JOHN PRISCO 10509 NORTH NEBRASKA AVENUE UNIT (P.O. Box NOT acceptable)		red office	1: 12
	nd street address of the new registered agent (if changed) are: JOHN PRISCO 10509 NORTH NEBRASKA AVENUE UNIT		red office	1:12
(if changed)	nd street address of the new registered agent (if changed) are: JOHN PRISCO 10509 NORTH NEBRASKA AVENUE UNIT (P.O. Box NOT acceptable)	#3		gent,
(if changed) The street add as changed wi	nd street address of the new registered agent (if changed) are: JOHN PRISCO 10509 NORTH NEBRASKA AVENUE UNIT (P.O. Box NOT acceptable) TAMPA, FLORIDA 33647	#3 ousiness offic	re of its registered a	gent,
The street add as changed wi Such change vautherized by	Iress of its registered office and the street address of the board, or the Corporation has been notified in writing	#3 business office f directors or g of the change	te of its registered a by an officer so ge.	gent,
The street add as changed wi Such change wauthorized by I hereby accept further agrees of my duties, adocument is be	Iress of its registered office and the street address of the board, or the Corporation has been notified in writing	#3 business office f directors or g of the change CO, PRESII muted or typed name n this canacia	by an officer so ge. DENT	
The street add as changed wi Such change wauthorized by I hereby accept further agrees of my duties, adocument is be	JOHN PRISCO 10509 NORTH NEBRASKA AVENUE UNIT (P.O. Box NOT acceptable) TAMPA, FLORIDA 33647 Iress of its registered office and the street address of the bill be identical. was authorized by resolution duly adopted by its board of the board, or the corporation has been notified in writing attree of an officer or director) of the appointment as registered agent and agree to act in the to comply with the provisions of all statutes relative to the action of the provision of the obligation of my positive of the appointment as registered accept the obligation of my positive of the interest of the provision of the obligation of my positive of the interest of the obligation of my positive of the interest of the obligation of the positive of the obligation of my positive of the interest of the obligation of the positive of this change.	#3 business office f directors or g of the change CO, PRESII muted or typed name n this canacia	by an officer so ge. DENT me and title) ty. and complete performistered agent. Or, it hereby confirm the	

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