Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000130565 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

: CORPDIRECT AGENTS, INC. Account Name

Account Number : 110450000714 : (850)222-1173 Phone

: (850)224-1640 Fax Number

REGISTERED AGENT CHANGE

365 FANTASY SPORTS INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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Corporate Filing Menu

5/15/2008 3:05:55 PM

To: Florida Department of State Subject RA2785.86449

From: Kim Weidenbach

Friday, May 16, 2008 2:37 PM Page: 1 of 3

850-817-6381

5/16/2008 11:57 PA

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Florida Dept of State



May 16, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

365 FANTASY SPORTS INC 1005 W STATE ROAD 84 # 181 FORT LAUDERDALE, FL 33315US

SUBJECT: 365 FANTASY SPORTS INC

REF: P08000012856

* Please use original Submission date as File date #

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6906.

Darlene Connell Regulatory Specialist II FAX Aud. #: H08000130565 Letter Number: 708A00031311

RECEIVED
UNBHAY 16 AM 8: 00
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

CR2E045 (8/05)

H080001305653

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this onge is submitted for a corporation organized under the laws of the State of Florida or to change its registered office or registered agent, or both, in the State of Plarida.	
I. The name of (the corporation: 365 Fantasy Sports Inc	
	office address: 1005 W. State Road 84 #181, Fort Lauderdale, FL 33315	
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: 02/04/2008	
	d street address of the current registered agent and registered office on file with the riment of State:	
	Nell Odze	
•	1005 W. State Road 84 #181	43
	Fort Lauderdale, FL 33315	Í
6. The name and (if changed):	Nell Odze 1005 W. State Road 84 #181 Fort Lauderdale, FL 33315 d street address of the new registered agent (if changed) and /or registered office	
	CorpDirect Agents, Inc.	
	515 E Park Ave	
	(P.D. Box NOT exceptable) Tallahassee, FL 32301	
The street addr	ess of its registered office and the street address of the business office of its registered agent. I be identical.	
Such change w	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.	
Mell	Neil Odze - President (Provided or typed name and title)	
•	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 i am familiar with and accept the obligation of my position as registered agent. Or, if this ting filed merely to reflect a change in the registered affice address, I hereby confirm that the is been notified in writing of this change.	
Katie	Jonach Asst. Sec. 5/15/08 Ignature of Registered Agent) (Date)	
If signing on b	chalf of an entity:	
Assista	nt Secretary - Katie Wônsch (Typed or Printed Name)	
	* * * FILING FEE: \$35,00 * * *	
	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE	