

PI1000089362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

R.A.

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11-29-11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** #1 Pro Sports System, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P11000089362

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:

Steven Chanzas  
Name of Contact Person

#1 Pro Sports System, Inc.  
Firm/Company

3845 Huelva Court  
Address

Naples, FL 34109  
City/State and Zip Code

s\_chanzas@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Chanzas at ( 239 ) 593-4372  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 17, 2011

STEVEN CHANZES  
#1 PRO SPORTS SYSTEM, INC.  
3845 HUELVA COURT  
NAPLES, FL 34109

SUBJECT: #1 PRO SPORTS SYSTEM, INC.  
Ref. Number: P11000089362

We have received your document for #1 PRO SPORTS SYSTEM, 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 document must also contain the address of the registered agent which must be at a Florida street address.

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) 245-6925.

Teresa Brown  
Regulatory Specialist II

Letter Number: 211A00026093

**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: #1 Pro Sports System, Inc.
2. The principal office address: 3845 Huelva Court  
Naples, FL 34109
3. The mailing address (if different): N/A
4. Date of incorporation/qualification: 10/12/2011 Document number: P11000089362
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)

Edward Worthington - Resigned

3845 Huelva Court

Naples, FL 34109

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

Steven Chanzas

3845 HUELVA COURT

P.O. Box NOT acceptable

NAPLES, FLORIDA 34109

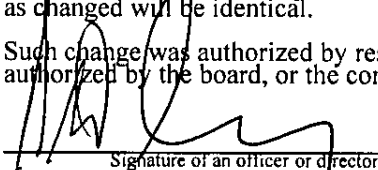
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 NOV 28 AM 10:06

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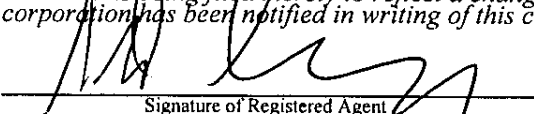
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

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

Steven Chanzas - Treasurer  
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

November 11, 2011  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)