

To: Page 2 of 3
Division of Corporations

P141000033909
6/10/2014 2:15:16 PM PDT 13239628300 From: Emma Richardson

Florida Department of State
Division of Corporations
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REGISTERED AGENT CHANGE
INTUITIVE SPORTS SOLUTIONS CORP.

Certificate of Status	0
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Page Count	02
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FAX COVER SHEET

TO

COMPANY

FAX NUMBER 18506176380

FROM Emma Richardson

DATE 6/10/2014 2:14:49 PM PDT

RE FL Amendment LZ Order #509930241

COVER MESSAGE

Emma Richardson
Document Processor, Business Services
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FEDEXOFFICE

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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: INTUITIVE SPORTS SOLUTIONS CORP.
2. The principal office address: 508 Shadow Grove Ct., Lutz, FL 33548
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/15/2014 Document number: P14000033909
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)
JAMES C COOK
508 SHADOW GROVE CT.
LUTZ, FL 33548
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
United States Corporation Agents, Inc.
13302 Winding Oaks Court, Suite A
P.O. Box NOT acceptable
Tampa, FL 33612

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.

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 an Officer or Director

James C. Cook, President
Printed or typed name and title

Signature of Registered Agent

4/10/14
Date

If signing on behalf of an entity:

Chayenne Moseley, Assistant Secretary
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
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