

P2200000 41056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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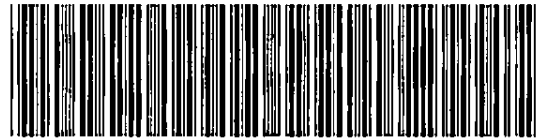
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Sport Holdings Florida, Inc.
Name of Corporation

DOCUMENT NUMBER: P22000041056

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:

Carol Kregel

Name of Contact Person

Kelleher Holland LLC

Firm/Company

102 S. Wynstone Park Drive

Address

North Barrington, IL 60010

City/State and Zip Code

ckregel@kelleherholland.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol Kregel

Name of Contact Person

at (847)

713-1355

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRETARY OF STATE
TALLAHASSEE, FL

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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: SPORT HOLDINGS FLORIDA, INC.
2. The principal office address: 13925 OLD COAST RD UNIT 2304
NAPLES, FL 34110
3. The mailing address (if different): N/A
4. Date of incorporation/qualification: 5/20/2022 Document number: P22000041056
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)

GAIL SKLAR

13925 OLD COAST RD UNIT 2304

NAPLES, FL 34110

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

Darren Mills

1100 5th Avenue South, Suite 410

P.O. Box NOT acceptable

Naples, FL 34102

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.

Gail M. Sklar
Signature of an officer or director

Gail Sklar, President

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]
Signature of Registered Agent

December 12, 2022

Date

If signing on behalf of an entity:

[Signature]
Typed or Printed Name

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

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TALLAHASSEE, FL