Requestor Name 35895 City/State/Zip Phone

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NonProfit	Resignation of R.A., O	fficer/Director	HIDA	
Limited Liability	Change of Registered A	Agent		
Domestication	Dissolution/Withdrawa	1	L 2	
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CR2E031(1/95)



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 1, 1997

FLORIDA GAMING CENTERS, INC. 1750 SOUTH KINGS HIGHWAY FT. PIERCE, FL 33450

SUBJECT: FLORIDA GAMING CENTERS, INC. Ref. Number: P96000085895

Our records indicate the registered agent for the above named corporation resigned on November 24, 1997 and that the corporation currently does not have a registered agent designated.

Chapter 607, Florida Statutes, requires this office to give 60 days notice of our intent to dissolve a corporation for failure to appoint and maintain a registered agent.

This letter is our notice of intent to dissolve the above named corporation 60 days from the date of this letter if a registered agent is not properly designated.

Enclosed is registered agent designation application for you to complete and return with a filing fee of \$35.

If you should need any further information, please contact our office at (850)-487-6050.

Carol Mustain Corporate Specialist

14 C S A M 8: 1 97 DEC 24 AM 8: 1 DIVISION OF CORPORAT.

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.150	
the undersigned corporation organized under the laws of the State of submits the following statement in order to change its registered offi	
the State of Florida.	· · ·
1. The name of the corporation is: Florida Gaming Centers, In	c
2. The mailing address of the corporation is: 3500 N.W. 37th A	venue
Miami, Florida	33142
3. Date of incorporation/qualification: 10/17/96 Document	ment number: <u>P96000085895</u>
4. The name and address of the current registered agent and office: Resigned:	97 DE SECR TALLA
Wilbur Brewton	_ ₩
225 South Adams St. Suite 2	50 SEE OF P
Tallahassee, Florida 32302	Box Not Acceptation ⇔
5. The name and address of the new registered agent and office: (P. O	. Box Not Acceptable
Timothy L. Hensley	· · · · · · · · · · · · · · · · · · ·
3500 N.W. 37th Avenue	· · · ·
Miami, Florida 33142	
The street address of its registered office and the street address of thagent, as changed, will be identical.	e business office of its registered
Such change was authorized by resolution duly adopted by its board authorized by the board	of directors or by an officer so
- CIVE (Q)	12/19/97
(Signature of an officer, chairman or vice chairman of the board)	(Date)
W.B. Collett, Jr. Executive Vice Presiden (Printed or typed name and title)	t <u>12/19/97</u> (Date)
Having been named as registered agent and to accept service of procorporation, I hereby accept the appointment as registered agent ar I further agree to comply with the provisions of all statutes relative performance of my duties, and I am familiar with and accept the obregistered agent.	ocess for the above stated and agree to act in this capacity. to the proper and complete
(Del Old la	
(Signature of Registered Agent)	12/19/97
If signing on behalf of an entity:	
(Typed or Printed Name)	(Capacity)

CR2E045(3/96)