## P97000033714

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
,		
(Cit	y/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	
	Office Use Onl	Y



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R.A. Change

T BROWN JAN 2 2 2003

## TRANSMITTAL LETTER

Division of Corporations
SUBJECT: SPORTSHARES, INC. (Name of corporation)
DOCUMENT NUMBER:
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:
CHRISTOPHER J HOLLORAN (Name of person)
SPORT SHARES, INC (Name of firm/company)
1940 HARRISON ST STEZOIC (Address)
HOLLYWOOD FL 33020 (City/state and zip code)
For further information concerning this matter, please call:
(Name of person) at (954) 922-3600 (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

TO: Amendment Section

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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

Pursuant to the provis	tions of sections 607.0502, t	617.0502, 607.150	)8, or 617.1508, Fla	rrida Statutes,
this statement of chang	e is submitted for a corporat	tion organized und	ler the laws of the St	ate of
FLORIDA	in order to change its registe	ered office or regi	istered agent, or bot	h, in the State
of Florida.	· · · · · · · · · · · · · · · · · · ·		,	\$ 50 W
1. The name of the cor	poration: SPORTSHA	RES, INC.		<u> </u>
2. The principal office	address: 1940 HARK			型三位
	HOLLYWOOD	fl 3302	<u> </u>	<u> </u>
3. The mailing address	(if different):			To the
01 the management			· · · · · · · · · · · · · · · · · · ·	Part of
4. Date of incorporatio	n/qualification: 04/15/9	)7 Docum	nent number: P9	1000033714
	address of the current registe		stered office on file	with the
	HRISTOPHER J	HOLLDRAI	<b>√</b>	
3:	30 VIRBINIA ST	#10		-
	LOLLYWOOD FL	33019		
1 . 1	et address of the <u>new</u> registe HRISTOPHER J			ered office (if
19	40 HARRISON S	T STE 201	<u></u>	-
				•
H	olywood FL.	33050		
The street address of it agent, as changed will	s registered office and the st be identical.	treet address of th	e business office of	its registered
Such change was authorized by the boar	orized by resolution duly add d, or the corporation has bee			
(Signature of an officer, chairman	or vice chairman of the board)	CHRISTOP (Printed o	HER 5 HOLL or typed name and title)	DRAN CED
I further agree to comp performance of my dui registered agent. Or.	pointment as registered ages oly with the provisions of all ties, and I am familiar with c if this document is being file y confirm that the corporation	nt and agree to ac I statutes relative and accept the obt ad merely to reflec on has been notifi	t in this capacity. to the proper and co ligation of my positi t a change in the re ed in writing of this	omplete on as gistered
lator		01/15/2		
	Registered Agent)		(Date)	<b>≈</b> _*
If signing on behalf of an e	•	CED		
CHRISTOPHER (Typed or P	inted Name)	CEU_	(Ĉapacity)	
• • •	•			

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