

P97000052213

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

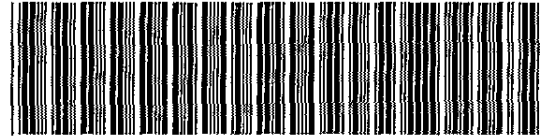
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700065905287

02/17/06--01059--005 **35.00

FILED

06 FEB 17 PM 1:10

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2 APR 2006

SPICOLA & LARKIN

Attorneys At Law

JOSEPH G. SPICOLA, JR.

JACK M. LARKIN

330 WEST BEARSS AVENUE, SUITE A
TAMPA, FLORIDA 33613

TELEPHONE 813-968-3383
FAX 813-968-2256

February 13, 2006

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Best Amusements Leasing, Inc.
Document number P97000052213

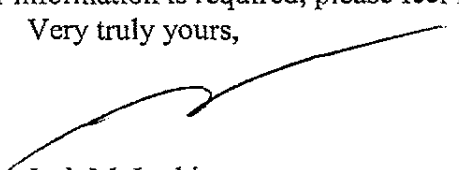
Gentlemen:

Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations which has been completed and signed by my clients regarding the above referenced corporation.

Additionally, enclosed is my firm's check in the amount of \$35.00 to cover the fee for filing this change.

If you have any questions or further information is required, please feel free to call on me.

Very truly yours,



Jack M. Larkin

JML:ibh

Enclosures

cc: Wayne W. Daniel

**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: Best Amusements Leasing, Inc.
2. The principal office address: 1331 Alameda Drive
Spring Hill, Florida 34609
3. The mailing address (if different): _____
4. Date of incorporation/qualification: June 12, 1997 Document number: P97000052213
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Corporate Creations Network, Inc.
941 Fourth Street, #200
Miami Beach, FL 33139

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

Thomas Sauvageot
1331 Alameda Drive
(P.O. Box NOT acceptable)
Spring Hill, FL 34609

FILED
06 FEB 17 PM 1:10
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

W.W. Daniel
(Signature of an officer or director)

W.W. Daniel - Vice 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.

Thomas Sauvageot President
(Signature of Registered Agent)

1-16-04
(Date)

If signing on behalf of an entity:

Thomas Sauvageot
(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)