14154847068 Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

ACCOUNT Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number: 110432003053 Phone : {561}694-8107

Fax Number : {561}214-8442

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

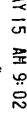
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REGISTERED AGENT CHANGE PGA GOLF PARTNERS, INC.

Certificate of Status	0
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Page Count	02
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Electronic Filing Menu

Corporate Filing Menu



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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute inge is submitted for a corporation organized under the laws of the State of <u>FL</u> ir to change its registered office or registered agent, or both, in the State of Florida		~
1. The name of	the corporation: PGA Golf Partners, Inc.		_
2. The principal	office address: 1916 PGA Parkway Frisco, TX 75033		
3. The mailing a	address (if different): 1916 PGA Parkway Frisco, TX 75033 poration/qualification: 08/10/1992 Document number: V57114		_
4. Date of incorp	poration/qualification: 08/10/1992 Document number: V57114		
	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)		
	Blasband, Andrew T		~ •
	··· · · 	SLOTE	2023 MAY 15
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	TALLAHASSEE,	표
	Corporate Creations Network Inc.	THE STATE OF	9: 02
	801 US Highway 1 North Palm Beach FL 33408	1	2
	P.O. Box NOT acceptable		
The street addre	ess of its registered office and the street address of the business office of its regis be identical.	tered ager	11,
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an office ie board, or the corporation has been notified in writing of the change.	r so	
	Ariana Turoski, Attorney-in-fact Printed or typed name and title		_
I hereby accept I further agree t of my duties, an document is beit corporation has	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete ; d I am familiar with and accept the obligation of my position as registered agen ng filed merely to reflect a change in the registered office address. I hereby con been notified in writing of this change.	verforman t. Or, if th irm that ti	ice tis he
	5/12/23		
Sign	sature of Registered Agent Date		-
If signing on bel	half of an entity;		
Ariana Turosk	ti, Special Secretary		
Τ̈́,	ped 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 (04/13)