I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KASPER, JOSH

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail : Title MGRM Title MGRM KASPER, ROB Name KASPER, JOSH Name P.O. BOX 20438 Address PO BOX 20438 Address City-State-Zip: TALLAHASSEE FL 32316 City-State-Zip: TALLAHASSEE FL 32316 Title MGRM KASPER, ADAM Name Address PO BOX 20438

FEI Number: 33-1192720

Name and Address of Current Registered Agent:

MANAUSA, DANIEL E 1309 JACKSON BLUFF RD TALLAHASSEE, FL 32304 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

City-State-Zip:

Electronic Signature of Registered Agent

DOCUMENT# L07000116253

Entity Name: STADIUM PROPERTY RENTALS, LLC

Current Principal Place of Business:

1311 JACKSON BLUFF ROAD TALLAHASSEE, FL 32312

Current Mailing Address:

P.O. BOX 20438 TALLAHASSEE, FL 32316

2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

Certificate of Status Desired: No

SIGNATURE:

TALLAHASSEE FL 32316

MANG MEMBER

04/12/2013

FILED Apr 12, 2013 Secretary of State CC0528382562

Date

Date