## Florida Department of State

Division of Corporations **Public Access System** 

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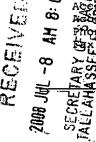
: (850)617-6380

Number

int Name

: CHARLES BACLET AND ASSOCIATES INC unt Number : 120080000054

: (949)955-9585 : (800) 652-6504



## REGISTERED AGENT CHANGE

TOPANGA PRODUCTIONS, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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## **COVER LETTER**

то:	Amendment Section Division of Corporation	on rations			
SUBJECT:		TOPANGA	PRODUCTIONS, INC.		
2020		(Name of Co	orporation)		
DOC	UMENT NUMBER	F960	000005526		
The er	nclosed Statement of	Change of Registered Office	Agent and fee are submitted for filing.		
Please	return all correspon	dence concerning this matter	to the following:		
		Sophy	Keo		
(Name of Contact Person)					
		Charles Baclet and	Associates, Inc.		
		(Firm/Co	· · · · · · · · · · · · · · · · · · ·		
		2030 Main Stre	et, Suite 1030		
		(Addı	ess)		
		•			
		Irvine, Ca (City/State an			
You fo	mkan infamatian aa				
ror iu	riner intormation coi	ncerning this matter, please c	an:		
		hy Keo ontact Person)	at ( 949 ) 955-9585 ext 21 (Area Code & Daytime Telephone Number)		
	(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		( and code = colymon resignation realists)		
Enclos	sed is a \$35.00 check	nade payable to the Depart	ment of State.		
	D. P.	mendment Section ivision of Corporations O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building		
	Te	illahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

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

statement of chang	ge is submitted for a co	rporation organize	607.1508, or 617.1508, Flor d under the laws of the State d agent, or both, in the State	of California		
1. The name of the	The name of the corporation: TOPANGA PRODUCTIONS, INC.					
2. The principal o	Mice address:	Vashington Blvd., Culver C	ity, CA 90232			
3. The mailing add	dress (if different):		-			
4. Date of incorpo	ration/qualification:	10/24/1996	Document number:	F9600000552	26	
5. The name and s Florida Departr		rent registered age	nt and registered office on fil	e with the		
	The Pre	ntice-Hall Corpor	ation System, Inc.			
_	1201 Hayes St., Ste 105					
_	,	Fallahassee, FL 32	301-2525		.80	
6. The name and s (if changed):	street address of the nev	w registered agent (	if changed) and /or registered	d office	18 JUL -8 AM 9: 45	
_		NRAI Service	s, Inc.		AH CORP	
		1 Executive Park	Drive, Šuite 4		7 9:	
_	<b>(</b> P O.	Box NOT acceptable) Weston, FL	13331	<del></del>	08.416 9:45	
=		e and the street ad	dress of the business office		~	
Such change was authorized by the	authorized by resolut board, or the corpora		by its board of directors or be field in writing of the change Steven Goffman, Assi			
,	of an office of director)		(1 I I I I I I I I I I I I I I I I I I I	e mie titio,	_	
I hereby accept if further agree to of my duties, and document is bein corporation has to the corporation of the corporation and the corporation are to the corporation of the corporation and the corporation are to the corporation and the corporation are to the corporation and the corporation are to the corporation and the corporation are the corporation are the corporation are the corporation and the corporation are the corporati	he appointment as reg comply with the prov I am familiar with an g filed merely to reflec been notified in writin	istered agent and disions of all statute diaccept the obligate a change in the l g of this change.	agree to act in this capacity is relative to the proper and ation of my position as regis registered office address, I i	complete perform stered agent. Or, i hereby confirm tha	iance if this it the	
Rei	alure of Registered Agent)		7/3/20	008		
If signing on beh	alf of an entity: By:	NRAI Services, Inc	:			
Gabriel Hu	ghes, Assistant Secre	tary				
(Ту	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 (8/05)