

M01000001704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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T. CLINE  
6-24-09  
EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ascent Media Systems & Technology Services, LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michele Tully  
Name of Person

National Service Source, Inc.  
Firm/Company

9145 Ellis Rd  
Address

Melbourne, FL 32904  
City/State and Zip Code

michele.tully@ussi.org  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Michele Tully at ( 321 ) 723-5395 x135  
Name of Person Area Code and Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- \$25 Filing Fee     
  \$30 Filing Fee & Certificate of Status     
  \$55.00 Filing Fee & Certified Copy     
  \$60 Filing Fee, Certificate of Status & Certified Copy

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY  
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Ascent Media Systems and Technology Services, LLC

2. This entity was formed under the laws of: DE

3. This entity was authorized to transact business in Florida on 07/27/2001  
and its Florida document/registration number is M01000001704

4. The name and address of each manager or managing member is as follows:

Title:  
"MGR" = Manager  
"MGRM" = Managing Member

Name and Address:

MGRM


DAVID S. CHRISTIANO  
9145 ELLIS RD  
MELBOURNE FL 32904

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Required Signature: \_\_\_\_\_

  
Signature of Manager, Managing Member or Member

Filing Fee: \$25