## P1000000/890

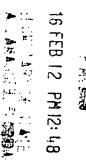
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(Business Entity Name)				
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## COVER LETTER

TO: Amendment Section Division of Corporations SOUTH OF MAIN PRODUCTIONS INC. Name of Corporation 210000001890 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Claire Reid Name of Contact Person Eastbiz.com, Inc. Firm/Company 5348 Vegas Dr Address Las Vegas NV 89108 City/State and Zip Code info@incparadise.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Claire Reid 702 871-8678

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organiz to change its registered office or register	zed under the laws of the State of Fl	orida
1. The name of t	he corporation: SOUTH OF MAIN I	PRODUCTIONS INC.	
2. The principal	office address: 1745 Camino Palm	ero St Apt 406, Los Angle	s, CA 90046
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 01/06/2010	Document number: P1000	0001890
	street address of the current registered ag tment of State: (If resigned, enter resigned		1 the
	AL-TAHER, SUZANNE N		
5501 SW 163RD AVE			
	SOUTHWEST RANCHES, FL	. 33331	<b>&gt;</b>
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office		FEB 12 PM
	Patricia A. Floyd		P. B
	13916 Bramble Bush Ct		12: 48
	P.O. Box NOT a Orlando, FL 32832	occeptable	σ
The street addre	ss of its registered office and the street a be identical.	ddress of the business office of its	registered agent,
Such change wa authorized by th	s authorized by resolution duly adopted be board, or the corporation has been noti	by its board of directors or by an of fied in writing of the change.	fficer so
	to of an officer or director	Al-Taher, Suzanne N, Pre	esident
I hereby accept I further agree to performance of	the appointment as registered agent and o comply with the provisions of all statu my duiles, and I am familiar with and ac s document is being filed merely to reflec that the corporation has been notified in	agree to act in this capacity tes relative to the proper and comp cept the obligation of my position o	as registered
Take	ia floga	02/08/2016	
_	nature of Registered Agent	Date	
т	ped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*