

F14000005205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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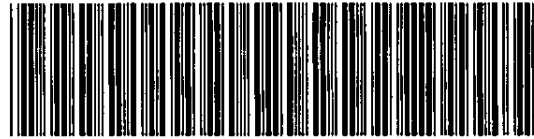
(Business Entity Name)

(Document Number)

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TO: Amendment Section
Division of Corporations

SUBJECT: American Multi-Media Syndicate Inc.
Name of Corporation

DOCUMENT NUMBER: F 14000005205

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:

Frank Ruiz
Name of Contact Person

Clear Media Broadcasters
Firm/Company

1995 NE 147 st N.M. FL. 33181
Address

North Miami FL. 33181
City/State and Zip Code

Frankruizaudio@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank Ruiz at (786) 985 4222
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

Street Address:
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**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: American Multi-Media Syndicate
2. The principal office address: 1995 NE 147 st. #. suit C
North Miami FL 33181
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/22/16 Document number: F14000005205

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

InCorp Services, Inc.
17888 67th Court North
Loxahatchee, FL 33470 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Clear Media Broadcasters Inc
1995 NE 147 st.
P.O. Box NOT acceptable
North Miami FL 33181

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IN AND FOR THE STATE OF FLORIDA
TALLAHASSEE

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

President
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

10/19/16
Date

If signing on behalf of an entity:

Frank Ruiz
Typed or Printed Name

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