(Requestor's Name)				
(Address)	000423472520			
(Address)				
(City/State/Zip/Phone #)				
(Business Entity Name)	TALLAHASSE			
(Document Number)	EE. FLORIDA			
ertified Copies Certificates of Status	DA 1 0			
Special Instructions to Filing Officer.				
· · · · · · · · · · · · · · · · · · ·				
Office Use Only	2024 FEB -8 PH 3: 20 ALLAHASSEE, FLORID			
	PH 3: 20 E. FLORID,			

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	120000000	195	
	REFERENCE				
	AUTHORIZATION	: (Table	12an	
	COST LIMIT	:	\$ 35.00	near	
ORDER DATE :	January 23, 2024				
ORDER TIME :	1:44 PM				
ORDER NO. :	281594-093				
CUSTOMER NO:	7810011				

CHANGE OF AGENT

NAME: WARNER CHAPPELL MUSIC, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

EXAMINER'S INITIALS:

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

1. The name of the corporation: WARNER CHAPPELL MUSIC, INC.

2. The principal office address: 777 S. Santa Fe Ave LOS ANGELES, CA 90021

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 09/14/1995 Document number: F95000004465

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

	CT CORPORATION SYSTEM			1024	
	1200 S. PINE ISLAND RD			FEB	<u> </u>
		FL	33324	1-8 ASSI	Γ
6. The name and (if changed):	street address of the new registered	l agent (if changed) and	/or registered o		C
	Corporation Service Company		<u> </u>	RIDA L3	
	1201 Hays Street				
	p				
	Tallahassee	FL	32301		

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.

ature of an officer or director

Jill Cilmi, Vice 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. Thereby confirm that the corporation has been notified in writing of this change. Corporation Service Company

AGA CELLA By:

02/08/2024

Date

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President

* * * 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 (04/13)