

## **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CHARLES BACLET AND ASSOCIATES INC

Account Number : I20080000054 Phone : (949)955-9585 Fax Number : (800)652-6504

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SECRETARY OF STATE DIVISION OF CURPORATION

## REGISTERED AGENT CHANGE

STUDIO PAYROLL SERVICES, INC.

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Electronic Filing Menu

Corporate Filing Menu

Chanse 10,7/8/08

## **COVER LETTER**

TO: Amendment Section Division of Corporations						
SUBJECT:	STUDIO PAYROLL SERVICES, INC.					
· · · · · · · · · · · · · · · · · · ·	(Name of Corporation)					
DOCUMENT NUMBER:	F98000006188					
The enclosed Statement of Change	of Registered Office/Agent and fee are submitted for filing.					
Please return all correspondence co	oncerning this matter to the following:					
	•					
	Sophy Keo					
	(Name of Contact Person)					
	Charles Baclet and Associates, Inc.					
	(Firm/Company)					
2030 Main Street, Suite 1030						
	(Address)					
	Irvine, CA 92614					
	(City/State and Zip Code)					
For further information concerning	g this matter, please call:					
Sophy Keo						
(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

statement of chan	ige is submitted for a	corporation organize	507.1508, or 617.1508, Flo d under the laws of the Sta	te of <u>California</u>			
	in order to change its registered office or registered agent, or both, in the State of Florida.  The name of the corporation: STUDIO PAYROLL SERVICES, INC.						
The principal office address: 10202 W. Washington Blvd., Culver City, CA 90232							
3. The mailing ad	dress (if different):						
4. Date of incorp	oration/qualification:	11/9/1998	Document number:	F98000006188			
5. The name and Florida Depart		current registered ager	nt and registered office on	file with the			
	The P	Prentice-Hall Corpora	ation System, Inc.				
		1201 Hayes St.,	Sie 105				
		Tallahassee, FL 32	301-2525				
6. The name and (if changed);	street address of the n	new registered agent (	if changed) and for register	red office			
		NRAI Services	s, Inc.				
	2	731 Executive Park l	Drive, Suite 4				
	ቦ	NO Box NOT acceptable) Weston, FL 3	12221				
The street address changed will	ss of its registered of be identical.		dress of the business offic	ce of its registered agent,			
Such change was	s authorized by respl e coard, or the corpo	lution duly adopted boration has been notif	y its board of directors or ied in writing of the chan	by an officer so			
(Signatur	re of an officer or director)		Corii D. Berg, Exec.\ (Printed or typed as	V-P/Asst. Secretary			
I hereby accept I further agree to of my duties, and document is heir corporation has	the appointment as r to comply with the prod I am familiar with a ng filed merely to ref been notified in writ Ah	deixtered agent and convisions of all statute and account the obligation account the obligation of this change.	agree to act in this capact es relative to the proper a ation of my position as reg registered office address,	lty nd complete performance gistered agent. Or, if this I hereby confirm that the			
			7/3/200	o <u>&amp;</u>			
If signing on bel	nature of Registered Agent) half of an entity: B	By: NRAI Services, Inc	, (Linke)				
Gabriel H	ughes, Assistant Sec	retary					
(T)	yped or Printed Nume)						

\* \* \* 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)