

LO2000027749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

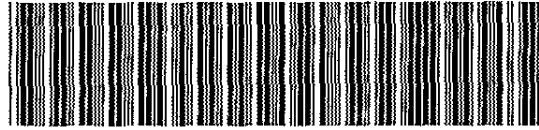
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LO2-27749

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DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Truth Entertainment, LLC

please
file
go



Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☒ RA Resignation Change
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☒ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: **TRUTH ENTERTAINMENT, LLC.**
2. The mailing address of the limited liability company (as amended on March 21, 2003) is:

1622 Pennsylvania Avenue, Suite #201

Miami Beach, FL 33139

3. Date of filing/registration in Florida: **10/21/2002**

4. Document number: **L02000027749**

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Name: **Susoreny, Greg F.**

Address: **1444 Biscayne Blvd., 303A**

City, State and Zip: **Miami, FL 33137**

6. The name and address of the new registered agent and/or office:

Name: **Schutzman, David S.**

Florida street address: **1622 Pennsylvania Avenue, Suite #201**

City, State and Zip: **Miami Beach, FL 33139**

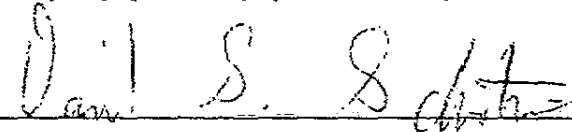
It is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[X] 

(Signature of a member or authorized representative of a member)

(Printed or typed name of signer): **DAVID S. SCHUTZMAN**

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 obligations of my position as registered agent as provided for in Chapter 608, F.S.

[X] 

(Signature of New Registered Agent)

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