## L04000057620

(Requestor's Name)									
(Address)									
(Ad	dress)								
(City/State/Zip/Phone #)									
PICK-UP	☐ WAIT	MAIL							
(Business Entity Name)									
(Document Number)									
Certified Copies	_ Certificates	s of Status							
Special Instructions to Filing Officer:									





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SECRETARY OF VIAITA

APR 2.2 2014 C. CARROTHERS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: April 10, 2014

Order#: 083346/042

Re: MILDRED KAYDEN MUSIC LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 $\overline{XX}$  Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Morgan Kennedy c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

Pursuant to the provisions of sections 605.0114 or 605.0116. 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.	Na	me of the limited liability company: MILDRED KAYD	EN MU	SIC LLC			
2.	(a)	10312 SHIREOAKS LANE	_ (b	)			
	()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability com (Note: MAY BE POST OFFICE BO				
		BOCA RATON FL 33498	_				
		08/02/2004		L0400005	7620		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	KAYDEN MILDRED					
٠.	(4)	Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of State	<b>::</b>		
		10312 SHIREOAKS LANE					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2			
		BOCA RATON ,FL	33498	ı			
	(b)	Corporation Service Company					
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Jince add	aress:			
		1201 Hays Street			er es		
		NEW Registered Office Address:			<b>E</b>	出る	
						APR CRE I	******
					步	点のこ	ECHEVADO COMPANION 1
		Tallahassee	22201		() [1] [1]	in F	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			32301				Garage Control
lf	the li	imited liability company is not organized under the law	s of the	State of Flo	rida, it is hereby co	nfirme <b>d i</b>	nat after
		inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab					
W	as/we	ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	`the lim	ited liability	y company or as other	erwise pro	ovided in
H	z ai ii	cies of organization of the operating agreement of the f	_				
	Signat	ture of a member or authorized representative of a member	Don	a Priebe At	uthorized Person  Printed or typed name of	of signee	
pr the to	ovisi e obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address. I ha I in writing of this change.	e to act perform for in C ereby co	in this capa ance of my a Chapter 605, onfirm that t	ncity. I further agre luties, and I am fam , F.S. Or, if this doc the limited liability o	e to comp iliar with cument is company l	ly with the and accept being filed as been
Si	gnatu	re of Registered Agent Corporation Service Company	BY: G	race E. Kirl	by, Asst VP		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00