## L04000092181

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
LD4-92187							





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SEGRESSION FIRE

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## TRANSMITTAL LETTER

	ation Section n of Corporations					
SUBJECT: P	anama City Radio, LLC (Name of Limited Liability Company)					
The enclosed Ar	ticles of Amendment and fee(s) are submitted for filing.					
Please return all	correspondence concerning this matter to the following:					
	Martin A. Clayman					
	(Name of Person)					
Clayman, Tapper & Baram, LLC						
	(Firm/Company)					
	Three Regency Drive					
	(Address)					
	Bloomfield, CT 06002					
	(City/State and Zip Code)					
For further inform	(City/State and Zip Code)  The state and Zip Code and Zip					
Mari	in A. Clayman at (860 ) 242-2221					
	(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check	for the following amount:					
☐ \$25.00 Filing Fe	certificate of Status  Certificate of Status & Certificate of Status & Certificate Copy  (additional copy is enclosed)  Certificate of Status & Certified Copy  (additional copy is enclosed)					

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

INHS18(10/99)

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 limite	d liability company is	Panama C	ity Radio, LL	<u>c</u>
2. The mailing address o	f the limited liability c	ompany is: 67	Walnut Hill	Road
Newton, MA 0245	59			*
December 10, 200	)4	_	L04000092187	
3. Date of filing/registrat	ion in Florida	4	. Document num	iber
5. The name of the registe Florida Department of		stered office ac	ldress as shown o	n the records of the
	Nicholas J. Rob			
	300 7-1	Name	-	
	100 Lake Shore	Address	1	
	North Dalm Poac		0	
	North Palm Beac City.	State and Zip	<u> </u>	
6. The name and address	of the new registered a	gent and/or off	īce·	
o. The game and address .	or mic mett regionaleur a	gont una or or		OS FEB 24 AM 11: 14 SEURLANA SEEE, FLORIDI
	Nicholas H. Rob	inson		FILED THE PLANT OF
		Name		全日日田
	100 Lake Shore	Drive, #205	1	5 2 F
	Florida street addres	s (P.O. Box N	OT acceptable)	B 24 A A A A A A A A A A A SEE.
	North Palm Beach	FL 3340	3	
	City, S	State and Zip		골을 두
the members of the limited the operating agreement o	ange or changes are me the registered agent we eby confirmed that the I liability company or	nade, the Florid ill be identical. change(s) was as otherwise prompany.	a street address o Or, in the case o /were authorized	orida, it is hereby f the registered office f a Florida limited by an affirmative vote of
Nicholas H. Robinso	n			
(Printed or typed name of signee)	·			
I hereby accept the appoint the provisions of th	ntment as registered as of all statutes relative laccept the obligation is document is being that the limited liability	gent and agree to the proper s of my position filed to merely y company has	to act in this cap and complete per n as registered as reflect a change i been notified in	acity. I further agree to formance of my duties, ent as provided for in n the registered office writing of this change.
Signature of Registered Agent)		<del></del>		
Division	of Corporations, P.	O. Box 6327, T	allahassee, FL	32314

**FILING FEE: \$25.00**