

L05000005602

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

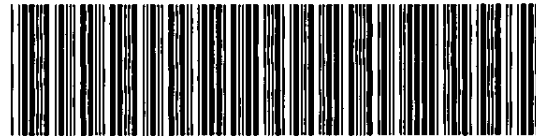
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/21/13--01001--008 **55.00

RECEIVED
13 MAY 20 PM 3:07
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED
2013 MAY 20 AM 9:48
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

MAY 21 2013

J. BRYAN

**CORPORATE
ACCESS,
INC.**

"When you need ACCESS to the world"

236 East 6th Avenue . Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP:

5/20 ACIDA

☒ CERTIFIED COPY

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LLC RA Change

1. Knock Music L.L.C.
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

FILED
2013 MAY 20 AM 9:43
CORPORATE BANK OF FLORIDA
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS:

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. Name of the limited liability company: Knock Music L.L.C.

2. (a) Principal office address of limited liability company: _____

(Note: MUST BE STREET ADDRESS)

8390 SW 94th Street
Miami, FL 33156

(b) Mailing address of limited liability company: c/o L. Alexander, CPA

(Note: MAY BE POST OFFICE BOX)

8 John Walsh Blvd., 305A
Peekskill, NY 10566

1/19/2005
3. Date of filing/registration in Florida

L05000005602
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Salaam Remi Gibbs

Registered Office Address: 8390 SW 94th Street
Miami, FL 33156

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: eResidentAgent, Inc.

NEW Registered Office Address: 236 E 6th Ave.
(MUST BE FLORIDA STREET ADDRESS) Tallahassee, FL 32303

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, 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.

Katie Thurman
Signature of a member or authorized representative of a member

Katie Thurman
Printed or typed name of signer

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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Katie Thurman
Signature of Registered Agent

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