

L060000009721

(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:

A. LUNT

DEC 17 2008

EXAMINER

Office Use Only



000138742760

12/15/08--01007--017 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 DEC 16 PM 1:46

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sound Vision Solutions LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Andre Lusink
(Name of Person)

Sound Vision Solutions LLC
(Firm/Company)

10575 68th Avenue Suite D-2,
(Address)

Seminole, FL 33772
(City/State and Zip Code)

For further information concerning this matter, please call:

Andre Lusink at (727) 470-3013
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

FILED
2008 DEC 16 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Sound Vision Solutions LLC

2. (a) Principal office address of limited liability company: 10575 68th Avenue Suite D-2,
(Note: **MUST BE STREET ADDRESS**) Seminole, FL 33772

(b) Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)

10575 68th Avenue Suite D-2,
Seminole, FL 33772

01/26/2006

3. Date of filing/registration in Florida

L06000009721

4. Document number

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

Registered Agent:

Spiegel & Utrera PA

Registered Office Address:

1840 SW 22ND ST 4TH FLOOR
MIAMI FL 33145 US

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

NEW Registered Agent:

Andre Lusink

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

10575 68th Avenue Suite D-2,

Seminole, FL 33772

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.

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

Andre Lusink

(Printed or typed name of signee)

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.

Andre Lusink
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00