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S. CHATHAM AUG 17 2023



COVER LETTER

	Registration Section Division of Corporations	•	•			
SUBJE		BEHIND THE VEIL RECORDS, LLC				
30130	Name of Limited Liability Company					
Dear Sir	or Madam:					
The enc	losed Registered Agent/Registered	Office Change a	nd fee(s) are submitted for filing.			
Please n	eturn all correspondence concerning	g this matter to t	he following:			
Toni Sto	skes Rackard					
	Name of Person		- 			
BEHINI	THE VEIL RECORDS, LLC					
	Firm/Company					
4905 SV	V 115th Street					
	Address					
Ocala, F	L 34476					
	City/State and Zip Cod	le				
tonirack	ard@gmail.com					
E-	mail address: (to be used for future	annual report no	otification)			
For furtl	her information concerning this mat	ter, please call:				
Toni S F	tackard	813 at (735-3754			
	Name of Person	(Area Code & Daytime Telephone Number			
	Mailing Address:		Street Address:			
	Registration Section		Registration Section			
	Division of Corporations		Division of Corporations			
	P.O. Box 6327		The Centre of Tallahassee			
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the follow	ing amount:				
	■ \$25 Filing Fee		\$55 Filing Fee & Certified Copy			

STATÉMENT 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.

Name of the limited liability company: BEHIND THE	VEIL RECORDS.	LLC
a) 9844 ROCKHILL RD THONOTOSASSA, FL 33592	(b) <u>4</u> 905	S SW 115TH STREET ROAD OCALA. FL 3447
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
05/17/2007	L07000	0052612
Date of filing/registration in Florida	4.	Document number
(a) RACKARD, DERRICK		
Registered Agent and Registered Office shown on the records	of the Florida Dept. o	of State:
Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	
9844 ROCKHILL RD		
THONOTOSASSA	FL	8
Rackard, Toni		29
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	red Office address:	
9844 Rockhill Road		
NEW Registered Office Address:		
THONOTOSASSA	FL 33592	
the limited liability company is not organized under the range or changes are made, the Florida street address of the twill be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member articles of organization of the operating agreement of the	the registered offic Hiability company is of the limited lia	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
JOI D Kackord	Toni S Rac	· · · · · · · · · · · · · · · · · · ·
unature of a member or authorized representative of a member		Printed or typed name of signee
reby accept the appointment as registered agent and a visions of all statutes relative to the proper and comple obligations of my position as registered agent as provi verely reflect a change in the registered office address, fied in writing affthis change.	ete performance of ded for in Chapter	f my duties, and I am familiar with and acce r 605. F.S. Or, if this document is being file
100 & Kackpiel		
fature of Registered Agent		