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(Re	equestor's Name)
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(Bu	siness Entity Name)
(Do	ocument Number)
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THE STATE



COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: _____SOUND PROOING & NOISE CONTROL, 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:

Salman Sheikh

Name of Person

Sound Proofing & Noise Control, LLC

Firm/Company

480 Hibiscus Street, Unit #109

Address

West Palm Beach, FL 33401 City/State and Zip Code

sams@allnoisecontrol.com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Salman Sheikh______at (-561) 704-8210

Name of Person

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Area Code & Daytime Telephone Number

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Enclosed is a check for the following amount:

X \$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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.

	ame of the limited liability company: SOUND		OFING & NC	DISE CON	T R O L
2. (a)	480 Hibiscus St., Unit #109 Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	_ (b)	-	nit #109 s of limited liability c <u>Y BE POST OFFICI</u>	company:
	West Palm Beach, FL 33401		West Palm Beach, F.	1_33401	
	11/6/2007			······································	
5 (a)	3. Date of filing/registration in Florida Kaniuk Law Office	4.	Document number		
<u>-</u> . (u)	Registered Agent and Registered Office shown on the records of th 1615 S Congress Ave, Suite #103	e Florida D	ept. of State:		
	Registered Office Address <u>(MUST BE FLORIDA STREET A</u> Delray Beach, Fl 33445				
	FL				
(b)	Salman Sheikh Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>)ffic <u>e addr</u>	<u>ess</u> :		
	480 Hibiscus St., Unit #109				
	<u>NEW</u> Registered Office Address: West Palm Beach, FL 33401				
	FL_			ØD	20
chang agent was/w	limited liability company is not organized under the laws e or changes are made, the Florida street address of the r will be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the li	egistered ality com the limit	office and the busines pany, it is hereby con ed liability company c	ss office of the re firmed that the cl or as otherwise pr	hange(s)
		Sa	lman Sheikh		
There provis the ob to mer	uure of a member or authorized representative of a member by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I hi d'in writing of this change.	e to act ir erforman for in Ch vreby con	r this canacity A furth	bed name of sighed her agree of Comp am familiar (e) this document is iability company	ب ohwith the and accept being filed has been

Signature of Registered Agent

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