## L100000000891

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Sity/State/2.p/i Hone #)		
- PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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FEB 11 2013 T. HAMPTON

## **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Infinite Music 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:		
Jeffrey H. Traymam Name of Person		
Infinite Music, LLC. Firm/Company		
3633 NW 23rd Terr. #202		
Gainesville, FL 32605 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:		
To((a, 1) = (a, a, a		
JETTYPY H. Mayn Da Mare of Person Area Code & D	aytime Telephone Number	
STREET/COURIER ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, Florida 32301  MAILING ADI  Registration Sec  Division of Corp  P.O. Box 6327  Tallahassee, Florida 32301	tion orations	
Enclosed is a check for the following amount:		
\$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 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: Infinit	e musicille
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	Gainesville, FL 32607
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3633 NW 23rd Ferr #200 Gainesville, FL 32605
1 5 2010  3. Date of filing/registration in Florida	<u>L10000000891</u> 4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	Jeffrey H. Traynham
Registered Office Address:	7001 SIN 24th Ave Gainesville, FL 32607
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	· · · · · · · · · · · · · · · · ·
NEW Registered Agent:  NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Jettrey H. Iraynham 3633 NW 23rd Terr #200
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change the members of the limited liability company or as others the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member-	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote of wise provided in the articles of organization or
Printed or typed name of signee	—————————————————————————————————————
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my chapter 508, F.S. Or, if this document is being filed to had accept. The refly confirm that the limited liability compa	agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in the neglistered office any has been notified in writing of this change.

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

Signature of Registered Agent