

05/07/2015 14:51 FAX 561 427 2975

001/003

Division of Corporations

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**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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**To:**

Division of Corporations  
Fax Number : (850) 617-6383

**From:**

Account Name : MCDONALD HOPKINS CO., PA  
Account Number : 120050000183  
Phone : (561) 472-7510  
Fax Number : (561) 472-2975

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT CHANGE  
THE POP CULTURE VAULT LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

15 MAY 27 PM 3:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: THE POP CULTURE VAULT 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:

Jaimie Paul

Name of Person

McDonald Hopkins LLC

Firm/Company

505 S. Flagler Drive, Suite 3300

Address

West Palm Beach, FL 33401

City/State and Zip Code

jpaul@mcdonaldhopkins.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jaimie Paul

at (561)

472-2121

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

INHS18 (2/14)

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SECRET  
FALL 2015

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# 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.

1. Name of the limited liability company: THE POP CULTURE VAULT LLC

2. (a) Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
15941 D'Alene Drive  
DELRAY BEACH, FL 33446

(b) Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
1946 SW BILTMORE STREET  
PORT ST LUCIE, FL 34984

3. 05/05/2010 Date of filing/registration in Florida

4. L10000046771 Document number

5. (a) Howard K. Coates, Esq.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State  
505 S. Flagler Drive, Suite #300

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

West Palm Beach FL 33401

(b) Alan Burger, Esq.

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

505 S. Flagler Drive, Suite #300

NEW Registered Office Address:

West Palm Beach FL 33401

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.

[Signature]  
Signature of a member or authorized representative of a member

Jerry Gladstone

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 605, 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.

[Signature]  
Signature of Registered Agent

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

INH918 (2/14)

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