## 410000014

(Requestor's Name)						
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(Do	sument Number					
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B. BOSTICK OCT 2.4 2011 EXAMINER

## COVER LETTER

10.	Division of Corporation	S				
SUB.	IECT:	Brool	ksville N	lusic, LL(		
		Name of Lin	nited Liab	ility Compa	ny	
Dear	Sir or Madam:					
The e	nclosed Registered Agent	Registered Offi	ice Chang	e and fee(s)	are submitted for	filing.
Pleas	e return all correspondence	concerning thi	s matter t	o the follow	ing:	
	Harold Name of Per		·			
	Brooksville	Music				
	Firm/Compa			<del></del>		
	19225 Cort	ez Blvd.		<del></del>		F0 _
	Brooksville, l	FL 34601				LINE ST
	City/State and Z	ip Code		_		C. 14
E	BrooksvilleDuke(	Dhotmail.com	ication)	<del></del>		E FLORI
For fi	arther information concern	ing this matter,	please cal	1;		TE A
	Harold Lyon	a	t ( <u>352</u>	Area Code & I	593-4988 Daytime Telephone Nur	nher
	STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, Florida 32301	cle	Re Di P.0	AILING AD gistration Servision of Cor D. Box 6327 Ilahassee, Flo	DRESS: ction porations	inei
	Enclosed is a check for	the following	amount:			
	\$25 Filing Fee		<b>\$</b>	55 Filing Fe	ee & Certified Cop	у

## 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:	Brooksville Music, LLC				
2. (a) Principal office address of limited liability compar	y: 19225 Cortez Blvd.				
(Note: MUST BE STREET ADDRESS)	Brooksville, FL 34601				
(b) Mailing address of limited liability company:	19225 Cortez Blvd.				
(Note: MAY BE POST OFFICE BOX)	Brooksville,FL 34601				
9/28/2010	L10000101690				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:				
Registered Agent:	Curtis C. Huett				
Registered Office Address:	12296 Dry Creek Ranch Rd. Brooksville, FL 34614				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	W Registered Office address:  Harold Lyon				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	19225 Cortez Blvd.				
MUSI BE FLORIDA SIREEI ADDRESS)	Brooksville ,FL34601				
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 ider liability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registered office atical. Or, in the case of a Florida limited as was/were authorized by an affirmative vote				
organization of authorized representative of a member	Service Control of the Control of th				
Harold Lyon					
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 p Chapter 608, F.S. Or, if this document is being filed to maddress, I hereby confirm that the limited liability company.  Signaphre of Registered Agent					

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