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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Queinage Entity Name)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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B. BOSTICK
MAR 2 9 2011
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	SUBJECT: EQ Audio Visual Solutions LLC Name of Limited Liability Company						
Dear :	Sir or Madam:						
The en	nclosed Registered Agent/Register	ed Office	Change and fo	ee(s) are submitted	d for filing.		
Please	e return all correspondence concer	ning this m	atter to the fo	ollowing:			
	Adam Stevens				·		
	Name of Person						
	EQ Audio Visual Solution Firm/Company	s LLC	***************************************				
	398 E. DANIA BEACH BLV	'D. #191			i'AL	_	
	Address				LAH	1 ##	
	DANIA BEACH FL 33	004			ASSE	1 MAR 3 I	Ç=manm J
	City/State and Zip Code		_		To:	PH	
E-	livesoundtech@yahoo. mail address: (to be used for future annual re	com port notification	on)		TATE ORIDA	PH 1:27	ALL F
For fu	rther information concerning this	natter, ple	ase call:				
	Adam Stevens	at (_	561_)	789-835	57		
	Name of Person		Area Co	de & Daytime Telephon	ie Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registration of P.O. Box 6	f Corporations			
	Enclosed is a check for the follo	wing amo	ount:				
	\$25 Filing Fee		\$55 Filir	g Fee & Certified	Сору		

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.

Name of the limited liability company:	EQ Audio Visual Solutions LLC						
2. (a) Principal office address of limited liability com	npany:						
(Note: MUST BE STREET ADDRESS)	398 E. DANIA BEACH BLVD. #191 Dania Beach, FL 33004						
(b) Mailing address of limited liability company:							
(Note: MAY BE POST OFFICE BOX)	398 E. DANIA BEACH BLVD. #191 Dania Beach, FL 33004						
1/14/2011	L11000006137						
3. Date of filing/registration in Florida	4. Document number						
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
Registered Agent:	Adam H. Stevens						
Registered Office Address:	1414 Arthur ST Hollywood, FL 33020 👼						
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	NEW Registered Office address: ω Adam H. Stevens 398 E. DANIA BEACH BLVD.#191						
[Mesi be i bendersi keel Abbress]	Dania Beach ⇒ ,FL33004						
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 of a member or authorized representative of a member							
Adam H. Stevens							
Printed or typed name of signee							
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability com	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, y position as registered agent as provided for in merely reflect a change in the registered office pany has been notified in writing of this change.						
Signature of Registered Agent							

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