

L11 000114 090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

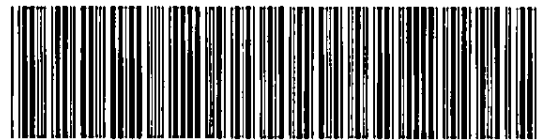
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700373812517

09/27/21--01013--019 **25.00

SEP 27 AM 6:15

OCT 06 2021
SNC

•

TO: Registration Section

KEEP IT 100 MUSIC GROUP, LLC

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:

HERBEY DUVĀL¹

KEEP IT 100 MUSIC GROUP, LLC.

421 NW 104 TERRACE

MIAMI, FL. 33150

ZOEMAN500@GMAIL.COM

For further information concerning this matter, please call:

HERBEY DUVAL

Mailing Address:

Street Address:

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 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: KEEP IT 100 MUSIC GROUP, LLC.

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

421 NW 104 TERRACE

421 NW 104 TERRACE

MIAMI, FL. 33150

MIAMI, FL. 33150

10/05/2011

L11000114090

3. Date of filing/registration in Florida

4. Document number

5. (a) HERBEY DUVAL

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

688 NW 112 STREET

MIAMI, FL. 33168

(b) HERBEY DUVAL

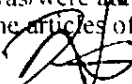
Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

421 NW 104 TERRACE

MIAMI, FL. 33150

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.

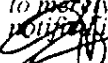


HERBEY DUVAL

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 of Registered Agent

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