1/20000/7404

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



300284867903

04/25/16--01023--005 **26.00



K.SALY EXAMINER APR 27

COVER LETTER

Division of Corporations				
SUBJECT: More Than Wordz Entertainment Name of Limited Liability Company				
Dear Sir or Madam:				
Dear Sir of Madain.				
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Lance Dameseus 4:11				
Larry Demarcus Hill Name of Person				
More Than Wordz Entertainment Firm/Company				
Firm/Company				
272 landa Clark O. Landa A.				
333 Laurina Street Apartment 204 Address				
Jacksonville, Florida 32216 City/State and Zip Code				
City/State and Zip Code				
hille more than wordz @ amaile com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Larry D. Hill at (904) 333-8797 Name of Person Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section				
Division of Corporations Division of Corporations				
Clifton Building P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301				
Enclosed is a check for the following amount:				
\$25 Filing Fee & Certified Copy				
INHS18 (2/14)				

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. Na	ame of the limited liability company: More Than Wordz	Entertainment
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	aucing Street Apartment 201 lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Jacksonville, Florida 32216	
3.	, — , — , — . — . — . — . — . — . — . —	DO 17404 Document number
5. (a)	Corporation Service Conpany Registered Agent and Registered Office shown on the records of the Florida Dept. of States 1201 Hays Street Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
(b)	Talla hassee ,FL 32301 Lacry Demarcus Hill Enter name of NEW Registered Agent and/or NEW Registered Office address:	TILE TARY OF TALL AHASSEE. F
	333 Laurina Street Apartment 204 NEW Registered Office Address:	AND 12 OF STATE FLORIDA
,	Jacksonville ,FL 322/6	
the cha agent v was/we	imited liability company is not organized under the laws of the State of Flounge or changes are made, the Florida street address of the registered office will be identical. Or, in the case of a Florida limited liability company, it is ere authorized by an affirmative vote of the members of the limited liability icles of organization or the operating agreement of the limited liability company.	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
<u>Ja</u> Signa	ture of a member or authorized representative of a member	Printed or typed name of signee -
I here provisi the obl to mer	by accept the appointment as registered agent and agree to act in this capa ions of all statutes relative to the proper and complete performance of my d igations of my position as registered agent as provided for in Chapter 605, ely reflect a change in the registered office address, I hereby confirm that t d in writing of this change.	_
	regi Registered Agent	