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(Re	equestor's Name)						
(Ad	dress)						
(Ad	ldress)	· - · · · · · · · · · · · · · · · · · · ·					
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
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C. CARROTHERS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Sylvia Queppet squeppet@cscinfo.com

Date: April 8, 2014

Order#: 086553/007

Re: SOUNDBALANCE CLT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Sylvia Queppet c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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	me of the limited liability company: SOUNDBALANG	CE CLT,	LLC				
2	(a)	4801 EXECUTIVE PARK COURT	(b))				
2.	(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		SUITE 100			 			
		JACKSONVILLE, FL 32216						
		07/26/2012		L1200009	6654			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	SMITH, P JEREMY JR.						
	` '	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	:			
		4801 EXECUTIVE PARK COURT	·					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS.					
		SUITE 100						
		JACKSONVILLE , FL	32216		ASEC SEC	14		
	(b)	Corporation Service Company		Office address:				
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	lress:		O AM	r TT	
		1201 Hays Street			010	င်း		
		NEW Registered Office Address:			FLORIDA	ည		
		<u>Tallahassee</u> , FL	32301					
the ag wa	e cha ent w is/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis bility co f the lim	tered office mpany, it is ited liability	and the business office of hereby confirmed that the company or as otherwise	of the	registered ange(s)	
	/s	s/ P. Jeremy Smith, Jr.	P. Je	eremy Smith	n, Jr., Authorized Person			
- :	Signat	ure of a member or authorized representative of a member			Printed or typed name of sign	iee		
pr the	ovisi e obl mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete is gations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change?	ee to act perform I for in C iereby co	in this capa ince of my a hapter 605, infirm that t	ncity. I further agree to d luties, and I am familiar , F.S. Or, if this docume he limited liability comp	compl with nt is l any k	ly with the and accept being filed as been	
Si	gnatu	e of Registered Agent Corporation Service Company	By: Sy	lvia Quep	pet, Asst. Vice Preside	nt		

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