L12000141696

(Requestor's Name)				
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CRM 10-6-14

COVER LETTER

TO:

INHS18 (2/14)

TO:	Registration Section Division of Corporations			
SUBJ	FSD AUDIO, LLC			
	Nam	Liability Company		
Dear :	Sir or Madam:			
The e	nclosed Registered Agent/Registered Off	ice Change a	and fee(s) are submitted for filing.	
Please	e return all correspondence concerning th	is matter to t	he following:	
FER	NANDO PEREZ III, ESQ.			
	Name of Person			77
PER	EZ & ASSOCIATES			14 OCT -6 SEURLARY SEURLARY
***	Firm/Company			12.8.8.2. - L
1303	3 N. ARMENIA AVE.			
	Address			Signal Constitution
TAM	1PA, FL 33607-5310			1> O
	City/State and Zip Code			
ferna	ando@easyvisas.net			
	E-mail address: (to be used for future ann	nual report n	otification)	
For fi	urther information concerning this matter	, please call:		
FER	NANDO PEREZ III, ESQ.	813	254-3512	
	Name of Person		Area Code & Daytime Teleph	one Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
	Enclosed is a check for the following	g 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 10/14	ur.		
1. Na	ame of the limited liability company: FSD AUDIO	, LLC	
2. (a)		(b)	
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4775 Distribution Dr., Building 2		
	Tampa, FL 33605		
	November 8, 2012	L12	2000141696
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	STEVEN A. CULBREATH, P.A.		
J. (u)	Registered Agent and Registered Office shown on the records o	f the Florida Dep	ı. of State:
	PLAZA TOWER, 111 - 2ND AVE., NE		
	Registered Office Address (MUST BE FLORIDA STREET		
	SUITE 900		
	ST. PETERSBURG	L_33701	SECONALLY A
(b)	FERNANDO PEREZ III, ESQ.	27	
(-)	Enter name of NEW Registered Agent and/or NEW Registere	d Office address	
	NEW Registered Office Address:		
	1303 N. ARMENIA AVE.		
	TAMPA F	. _{L_} 33607-53	10
the cha agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited la ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registere liability compa of the limited he limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
Signa	ature of a member or authorized representative of a member	<u> </u>	Printed or typed name of signee
provis the ob to mer	thy accept the appointment as registered agent and agions of all statutes relative to the proper and completed ligations of my position as registered agent as provided by reflect accounting in the registered office address, and in writing of this hanger	gree to act in t 'e performance led for in Chaj I hereby confil	his capacity. I further agree to comply with the e of my duties, and I am familiar with and accep oter 605, F.S. Or, if this document is being filed rm that the limited liability company has been

FILING FEE: \$25.00

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314