L1400001A356

(Requestor's Name)				
(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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Special Instructions to Filing Officer:				
J. HORNE MAY 2 2 2024				
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05/03/24--01024--002 **25.00



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CMP MUSIC, LLC	Name of Limited	Liability Company
Dear Sir or Madam:		, , ,
The enclosed Registered Agent/Registered (Office Change ar	nd fee(s) are submitted for filing.
Please return all correspondence concerning	this matter to th	ne following:
Donald W Pendry		
Name of Person		
Firm/Company		
247 N WESTMONTE DR		
Address		
ALTAMONTE SPRINGS, FL 32714		
City/State and Zip Code	<u> </u>	
TPENDRY@RISORSAMGT.COM		
E-mail address: (to be used for future a	annual report no	tification)
For further information concerning this matt	ter, please call:	
Donald W Pendry	407 at (772-0200
Name of Person		Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the followi	ing 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.

. Na	ame of the limited liability company:	.LC			
. (a)	265A Forest Trail, Brentwood, TN 37027	(b)	(b) 247 N Westmonte Dr, Altamonte Springs, FL 32714		
((, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	04/29/2014		4000069356		
	Date of filing/registration in Florida	4.	Document number		
. (a)	Costolo, Williams T				
	Registered Agent and Registered Office shown on the records o	of the Florida D	ept. of State:		
	2221 Bluff Oak Street				
	Registered Office Address (MUST BE FLORIDA STREET	TADD <u>RESS)</u>			
	Apopk . F	L 32712			
(b)	Donald W Pendry		FILED 2024 MAY -3 PH 4: 50		
, ,	Enter name of NEW Registered Agent and/or NEW Registere	ed Office addre	150 E		
	247 N Westmonte Dr		AN -3 PH		
	NEW Registered Office Address:		PH 4: 50 PH 4: 50		
	Altamonte Springs	L 32714			
iange jent v as/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited there authorized by an affirmative vote of the members icles of organization of the operating agreement of the	e registered liability composition of the limite e limited liab	office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in		
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee		
rovisi 1e obl 1 mere	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d'in writing of this change	gree to act in e performant ed for in Chi hereby conf	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accep upter 605, F.S. Or, if this document is being filed firm that the limited liability company has been		
ignatu	re of Registered Agent				

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