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JQ 10/12/20

COVER LETTER

Get More Productions, LLC SUBJECT:		
	ited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter	to the following:	
Erik Day		
Name of Person		
Get More Productions, LLC		
Firm/Company		
2300 NE 151st ST		
Address		
North Miami, FL 33181		
City/State and Zip Code		
eday@warrenhenryauto.com		
E-mail address: (to be used for future annual repor	t notification)	
For further information concerning this matter, please ca	ılı:	
Atana Wilson 30,	5 690-6010	
Name of Person	Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 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 following amount:		
■ \$25 Filing Fee	□ \$55 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.

Na	me of the limited liability company:	10113, L1			
(a)	2300 NE 151st ST		(b)(b) 2300 NE 151st ST		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. ,		ling address of limited liability company: Note: MAY BE POST OFFICE BOX)
	North Miami, FL 33181	_	No —	orth Miami,	FL 33181
	5/12/2014			.000076167	
	5/12/2014	- ,			
<i>.</i> .	Date of filing/registration in Florida Todd A. Fodiman, Esq.	4.		D	ocument number
a)	Registered Agent and Registered Office shown on the records of	the Flori	da Dej	ot, of State:	
	1111 Brickell Ave.				
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRE.	<u>SS)</u>		S 20
	Stc. 2150				120 A
	Miami, FI	33131			
					26 AH HASSE
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				AH &
	enter name of NEW Registered Agent and/or NEW Registered	Office 2	auui es	<u></u> .	. 58 FL
	3225 Aviation Ave.				117 🐷
	NEW Registered Office Address:		-		
	Suite 301				
	Miami FI	33133			
ige it v	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe ability of of the li limited	ered o comp imited	office and the any, it is he i	he business office of the registered ereby confirmed that the change(s) ompany or as otherwise provided it
gna	ture of a member or authorized representative of a member	_		P	rinted or typed name of signee
risi Obj I ef	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect alchange in the registered office address, I do not in writing of this change.	ee to a perfori d for in hereby	ct in i manc i Cha confi	this capaci e of mv du pter 605, F rm that the	ty. I further agree to comply with ties, and I am familiar with and acc T.S. Or, if this document is being fire I limited liability company has been
	ore of Registered Agent				