## U5000143814

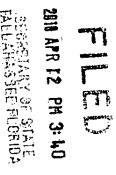
(Requestor's Name)	_
(Address)	_
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(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	1
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CSC - WILMINGTON . 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: April 10, 2018

Order#: 153520/005

Re: ALL DRONEUP PRODUCTIONS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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:Ashley Jiminez c/o Corporation Service Company 251 Little Falls Drive 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 <u>1</u>	Name of the limited liability company: ALL DRONEUP I	PRODUC	JCTIONS, LLC
2. (a	2505 WILD WOOD DR.  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	MELBOURNE, FL 32935		MELBOURNE, FL 32935
	08/21/2015	_	L15000143814
3.	Date of filing/registration in Florida	4.	Document number
5. (a	UNITED STATES CORPORATION AGENTS, INC.		
·	Registered Agent and Registered Office shown on the records of the	e Florida I	Dept. of State:
	13302 WINDING OAK COURT		
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)	2
	A		
	TAMPA , FL_		
(h	Corporation Service Company		
(b)	Enter name of NEW Registered Agent and/or NEW Registered O	Office addi	dress:
	1201 Hays Street		PA PARTY
	NEW Registered Office Address:		
	Tallahassee, FL	32301	
the cl agent was/v	limited liability company is not organized under the laws nange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the li	he regist oility con the limit	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
	Bryan Rein	Bryar	an Rein, Member
Sign	nature of a member or authorized representative of a member		Printed or typed name of signee
provi the oi to me notifi	eby accept the appointment as registered agent and agreesions of all statutes relative to the proper and complete publications of my position as registered agent as provided rely reflect a change in the registered office address, I he ed in writing of this change	erformat for in Ci ereby coi	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been tace E. Kirby, Asst. Vice President
	7	<b></b>	

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