

215000207407

To: Page 3 of 5
Division of Corporations

2017-11-06 16:21 49 CST

19542080845 From: Ranae McGraw

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : PCA000000023
Phone : (512) 418-6949
Fax Number : (954) 208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC REGISTERED AGENT CHANGE
BLUE BLOOD MUSIC, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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TALLAHASSEE, FLORIDA

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J. LEGGETT

NOV -8 2017

HONOR ORIGINAL DATE 11-02-17

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLUE BLOOD MUSIC, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAUL SCHINDLER, ESQ.

Name of Person

GREENBERG TRAURIG, LLP

Firm/Company

200 PARK AVENUE, 14TH FLOOR

Address

NEW YORK, NY 10166

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person

at (_____) _____

Area Code & Daytime Telephone 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 amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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. Name of the limited liability company: BLUE BLOOD MUSIC, LLC
2. (a) 200 Park Avenue, 14th Floor
Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
GREENBERG TRAURIG, LLP, Attn: Paul Schindler Esq.
New York, NY 10166
- (b) 200 Park Avenue, 14th Floor
Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Greenberg Traurig, LLP, Attn: Paul Schindler Esq.
New York, NY 10166
3. 12/14/2015
Date of filing/registration in Florida
4. L15000207407
Document number
5. (a) PAMELA O'CONNOR
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
162 PERUVIAN AVENUE
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
PALM BEACH, FL 33480
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
CT Corporation System
NEW Registered Office Address:
1200 South Pine Island Road
Plantation, FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Pamela O'Connor
Signature of a member or authorized representative of a member

Pamela O'Connor
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: CT Corporation System
Signature of Registered Agent

Joe Villeda
Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$75.00

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17 NOV -2 AM 9:51
STATE
TALLAHASSEE FLORIDA

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11/6/2017 9:19:18 AM PAGE 1/001 Fax Server

HONOR ORIGINAL DATE 11-02-17



November 6, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

BLUE BLOOD MUSIC, LLC
C/O MONARCH BUSINESS & WEALTH MGT.
209 E . 31ST STREET
NEW YORK, NY 10016US

SUBJECT: BLUE BLOOD MUSIC, LLC
REF: L15000207407

cc

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Part 5(a) has not been completed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

FAX Aud. #: H17000290027
Letter Number: 317A00022373

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