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J. HARRIE

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ест: Maison Studios	me of Limited Liability Company
Dear S	Sir or Madam:	
The er	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please	return all correspondence concerning the	nis matter to the following:
All	Name of Person	
Ma	IISON Studios L Firm/Company	<u>UC</u>
1317	3 E Emerald Coas	st PKWy Ste B126
<u>Inl</u>	et Beach FL City/State and Zip Code	32461
alļ	ISON @MAISON 5 TUC E-mail address: (to be used for future an	nual report notification)
For fu	rther information concerning this matter	, please call:
All	Name of Person	at (850) 496-8672 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

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

Enclosed is a check for the following amount:

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 Name of the limited liability company: Mailing address of limited liability company: Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX) 3. Date of filing/registration in Florida Document number Registered Agent and Registered Office shown on the records of the Florida Dept. of State (MUST BI Registered Office Address Agent and/or NEW Registered Office address:

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.

Signature of a member or authorized representative of a member Printed or typed name of signee

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.

Signature of Registered Agent