## 1/600059636

(Re	equestor's Name)				
(Address)					
(Ac	ldress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates	of Status			
Special Instructions to Filing Officer:					
	Office Use On				



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K. SALY JAN - 4 2018

## COVER LETTER

TO: Registration Section

Divi	ision of Corporations					
SUBJECT:	CK PRODUCTIONS LLC					
SUBJECT	Name of Limited Liability Company					
Dear Sir or S	Madam:					
The enclose	d Registered Agent/Registered Offic	ce Change and fo	ee(s) are submitted for filing.			
Please return	n all correspondence concerning this	s matter to the fo	Howing:			
Chris Krim	nitsos					
	Name of Person		-			
CK Produc	ctions LLC					
	Firm/Company		-			
4532 W K	ennedy Blvd., Ste 130					
	Address		-			
Tampa, Fl	L 33609					
	City/State and Zip Code		-			
chris@tbb	oo.org					
E-mail	address: (to be used for future annu	ial report notific	ation)			
For further i	information concerning this matter,	please call:				
Chris Krim	nitsos	813	362-1152			
	Name of Person	_ \	Area Code & Daytime Telephone Number			
Reg Divi Clif 266	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building 1 Executive Center Circle ahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enc	losed is a check for the following	amount:				
<b>2</b> S	25 Filing Fee	□ \$55	Filing Fee & Certified Copy			
INHS18 (2/1-	4)					

## 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.

I. Na	me of the limited liability company: CK Production	s LLC	; 	
2. (a)	4532 W Kennedy Blvd., Ste 130		(b) 4532 W Kennedy Blvd., Ste 130	
() .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (		lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Tampa, FL 33609	_	Tampa, F	FL 33609
	March 24, 2016	-	L1600005	9636
3. 5. (a)	Date of filing/registration in Florida Katie Krimitsos	4.		Document number
J, (a)	Registered Agent and Registered Office shown on the records of the 4532 W Kennedy Blvd., Ste 130	ie Florid	a Dept. of State:	:
	Registered Office Address (MUST BE FLORIDA STREET A. Tampa, FL 33609	DDRES	27	
	, FL_			<b>16 81</b> BISING
(b)	Chris Krimitsos			Z Z Ž
(0,	Enter name of NEW Registered Agent and/or NEW Registered 9	Office ac	ldress:	e COX
	4532 W Kennedy Blvd., Ste 130			RP ON U
	NEW Registered Office Address:			J. O
	Tampa, FL 33609			# 22 (D
	, FL_			
the cha agent w was/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization of the operating agreement of the l	the reg bility c the lir imited	istered office ompany, it is nited liability	and the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in apany.
Signat	ure of a member of authorized representative of a member		115 KIIIIIIISC	Printed or typed name of signee
provisi the obli to there notified	ov accept the appointment as registered agent and agree in sof all quatules relative to the proper and complete program of my position as registered agent) as provided by refer a change in the registered office address. I have thing of this change.	ee to ac perforn for in ereby c	t in this capa vance of my a Chapter 605, confirm that t	icity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been