

216000145846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

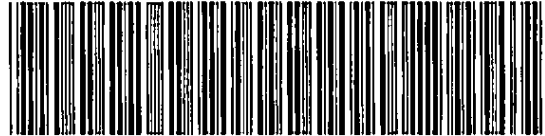
(Business Entity Name)

(Document Number)

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2018 APR 13 PM 4:02  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

J. LEGGETT  
APR 13 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 24, 2018

PRESTON DONALD MORELOCK  
135 HILLTOP DRIVE  
SANTA ROSA BEACH, FL 32459 US

SUBJECT: SOUND WAVES ENTERTAINMENT LLC.  
Ref. Number: L16000145846

We have received your document for SOUND WAVES ENTERTAINMENT LLC.  
and your check(s) totaling \$25.00. However, the enclosed document has not  
been filed and is being returned for the following correction(s):

→ Information in 5 (a) must be completed.

Please return the corrected original and one copy of 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.

Judy A Leggett  
Regulatory Specialist II  
Registration Section

Letter Number: 918A00001548

RECEIVED  
2018 APR 13 AM 11:27  
DIVISION OF  
CORPORATIONS  
FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Soundwaves Entertainment  
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:

Preston Donald Morelock  
Name of Person

Soundwaves Entertainment  
Firm/Company

135 Hilltop Drive  
Address

Santa Rosa Beach, FL 32459  
City/State and Zip Code

prestondomo@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Preston D. Morelock at ( 423 ) 754-5320  
Name of Person 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

**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. Name of the limited liability company: Soundwaves Entertainment

2. (a) 135 Hilltop Drive (b) "

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

Santa Rosa Beach, FL 32459

"

3. 9/12/13 Date of filing/registration in Florida 4. 66000145-846 Document number

5. (a) Legal Zoom / Christian Kostyo  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

2140 N 56th Terrace

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Hollywood, FL 33021

(b) Preston Donald Morelock  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

135 Hilltop Drive

NEW Registered Office Address:

Santa Rosa Beach, FL 32459

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]  
Signature of a member or authorized representative of a member

Preston D. Morelock  
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]  
Signature of Registered Agent

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