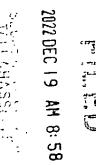
## 

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							





08/08/22--01033--001 \*+25.00



## **COVER LETTER**

TO;	Registration Section Division of Corporations	• •				
SUBJE	Precedent Audio Visuals, LLC					
SUBJE	Name of Limited Liability Company					
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning t	his matter to the f	following:			
Jacquel	yn Mack					
	Name of Person		_			
	Firm/Company		_			
12970	<sup>2</sup> ernway Rd.					
	Address	·· ·	_			
Orland	o, FL 32832					
	City/State and Zip Code		_			
jackie@	precedentav.com					
1	-mail address: (to be used for future a	unual report notifi	ication)			
For fur	ther information concerning this matte	er, please call:				
Jacque	lyn Mack	407 at (	413-2979			
	Name of Person		Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following	ng amount:				
	■ \$25 Filing Fee	55 Filing Fee & Certified Copy				



November 3, 2022

JACQUELYN MACK 12970 FERNWAY ROAD ORLANDO, FL 32832

SUBJECT: PRECEDENT AUDIO VISUAL LLC

Ref. Number: L20000072445

We have received your document for PRECEDENT AUDIO VISUAL 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):

The document must be signed by a member or an authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

2022 DEC 19 PM 3:38

Letter Number: 922A00024749

## 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. N	ame of the limited liability company:  Precedent Audio	Visuals, L	LC			
2. (a)	12970 Fernway Rd. Orlando, FL 32832			rnway Rd. Orlando, FL 32832		
, .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liabilit (Note: MAY BE POST OFFICE)		
		<del>-</del>				
_	03/04/2020		L200000724			
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Justin S. Mack			_		
	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	Þ:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-		
	12970 Fernway Rd.			2022 წლე	 	
	Orlando . FL	32832		<b>JE 1</b> 2022 DEC S TALLT A		
	Jacquelyn S. Mack			DEC 19 AM 8	ile de de	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:				i	
	NEW Registered Office Address:		<del></del> -	_		
	12970 Fernway Rd.		<u></u>	_		
	Orlando FI	32832		_		
change agent : was/w	limited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited his ere authorized by an affirmative vote of the members of seles of organization or the operating agreement of the	registere ability con of the limi	d office and npany, it is ted liability	I the business office of the hereby confirmed that the company or as otherwise in	registered change(s)	
~:	( a) w	Justir	n Mack			
I here provis, the ob- to mer notifie	thre of a member or authorized representative of a member by accept the appointment as registered agent and agricions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I is din writing of this change.	ree to act performa d for in C hereby co.	in this capa nce of my d hapter 605, nfirm that t	Printed or typed name of signee to con teity. I further agree to con luties, and I am familiar wi. F.S. Or, if this document the limited liability company	nply with the th and accept is being filed v has been	