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## 2804 Gateway Oaks Drive #100 Sacramento, CA 95833 Phone (800)533-7272 Fax (800)603-5868 REFERENCE # MUST BE ON INVOICE TO BE PAID

## NUMBER PAGES:

AE:

Date: March 23, 2023

Florida Department of State

1960

Cori Ann Crosthwaite

REFERENCE: 1935470

PO Box 6327

Tallahassee, FL 32314

Division of Corporations

TO:

FAX: 850-687-6381

PLEASE PERFORM THE FOLLOWING:

**ACCENTRIK ARTS & ENTERTAINMENT LLC** 

File Change of Registered Agent

IN: FL

PLEASE RETURN:

PLEASE CALL (800)533-7272 ATTN: Cori Ann Crosthwaite TO CONFIRM FILING RESULTS.

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET (800)533-7272

## 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.

	(b)	
Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	suny:	Mailing address of limited hability company (Note: MAY BE POST OFFICE ROS)
2022 RUDDER DR.	202	22 RUDDER DR.
VALRICO, FL 33594		LRICO, FL 33594
02/10/2022	1,201	000092205
Date of tiling registration in Florida	-1.	Document number
1		
Registered Agent and Registered Office shown on the re ROCKET LAWYER CORPORATE SERVICES		t, of State:
Registered Office Address	TREET ANDRESS	
The grade of the control of the cont	TREET ADDRESS	
155 OFFICE PLAZA DRIVE, IST FLOOR	TREET MINKESSY	
TALLAHASSEE	, FL_32301	
155 OFFICE PLAZA DRIVE, IST FLOOR TALLAHASSEE	, FL_32301	
TALLAHASSEE  Finter name of NEW Registered Agent and/or NEW Research SANCHEZ, STEVEN	FL 32301 FL define address	هر :
TALLAHASSEE  Finter name of NEW Registered Agent and/or NEW Research SANCHEZ, STEVEN	, FL_32301	هر :
TALLAHASSEE  Finter name of NEW Registered Agent and/or NEW Rosenses SANCHEZ, STEVEN	, FL_32301 , egistered Office address	هر :

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 Amember

Steven Sanchez

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