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## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Romani Records LLC
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:
Micholas Roman Name of Person
Romani Records Firm/Company
11 North Orange Ave Suite 800 Address
Orlando Fi 32801 City/State and Zip Code
Daddy Roman 2020 agmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nicholas Roman 11,407,350 6642
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

1.	Na	me of the limited liability company:	Reco	rds UC	
		111 North Orange Ave Principal office address of limited liability company:		Mailing address of limited (Note: MAY BE POST	liability company:
		(Note: MUST BE STREET ADDRESS)  Soite 800	_	Suite 800	OTTICE BOX
		Orlando Fr 32801	_	Orlando Fr	
		Jun 19th 2023		L230000371	59
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	Nicholas Lornan Registered Agent and Registered Office shown on the records of the	 ne Florida	Dept. of State:	
		Registered Office Address (MUST BE FLORIDA STREET A			
		Longwood			
		, FL_	32	750	
	(b)	Nicholas Roman			SECRET
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	ress:	AAY J
		111 North Orange Are NEW Registered Office Address:			FILED ARY OF OF CORP 22 PM
		5uite 800		<del></del>	STATE ORATIO
		<u>orlando</u> .FL	_32	80(	<b>₽</b> <u>O</u> E
the age wa	cha ent v is/wo	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regis bility co the lim	tered office and the business of mpany, it is hereby confirmed to ited liability company or as othe lability company.	fice of the registered hat the change(s) erwise provided in
-		$W \times 1 \wedge \cdots$		Nicholas Ponco	10

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.

Printed or typed name of signee

Signature of Register d Agent

Signature of a member or authorized representative of a member