Τo

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(((H230001063413)))



H230001063413ABCU

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : 120010000062 Phone : (323)962-8600 Fax Number : (323)389-0502

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	 	 	

LLC REGISTERED AGENT CHANGE KOV ENTERTAINMENT, LLC

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T. LEMIEUX MAR 2 2 2023

INHS18 (2/14)

COVER LETTER

TO: Registration Section Division of Corporations	•			
SUBJECT: KOV ENTERTAIL	NMENT, LLC			
Nam	e of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	s matter to the following:			
Cheyenne Moseley				
Name of Person				
Legalzoom.com, Inc.				
Firm/Company				
101 N. Brand Blvd., 11th Floor				
Address				
Glendale, CA 91203				
City/State and Zip Code				
Robert@KOVEntertainment.com				
E-mail address: (to be used for future annual	ual report notification)			
For further information concerning this matter,	please call:			
Cheyenne Moseley	800 773-0888 ext 9724			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle Tallahassee, Florida 32301	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.

I. Na	une of the limited liability company:	ER'	TAINM	IENT, LLC		
2. (a)	4905 34TH STREET S. SUITE 434	(b) 4905 34TH STREET S. SUITE 434				
Z. (B)	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS) ST. PETERSBURG, FL 33711	_ (1	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) TERSBURG, FL 33711		
3. 5. (a)	O3/03/2023 Date of filing/registration in Florida MEGAN RE Registered Agent and Registered Office shown on the records of the 4905 34TH STREET S. SUITE 434	4.	L2300010	Document number	200	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2	-	2023 FAR 2	
	ST. PETERSBURG FL	33711		_	I	
(b)	UNITED STATES CORPORATION AGENTS Enter name of NEW Registered Agent and/or NEW Registered 476 Riverside Ave. NEW Registered Office Address:	<u> </u>	dress:	-	AH 11: 09	
	Jacksonville .FL	32202		•		
the cha agent v was/we the arti Signa I here provisi the obli to men	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the wave of a member of the companient of the companient of the companient of the companient of the proper and complete it is statutes relative to the proper and complete it is statuted in the registered agent as provided the reflect a change in the registered office address, I have a companient of this change. Cheyenne Moseley, Assistant secretary states corporation agents, INC.	the regi bility of f the lim limited l ME ee to acceperform i for in the limited longer of the limited longer of the limited longer of the limited longer of the longer of the limited longer of the	stered office ompany, it is sited liability liability con GAN RE tim this cap- ance of my Chapter 602 onfirm that	e and the business off s hereby confirmed the y company or as othe apany. Printed or typed name of acity. I further agree outies, and I am fami	fice of the registered that the change(s) rwise provided in f signer to comply with the lier with and accept	