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		To: Division of Corporations Fax Number : (850) 617-6383	ר
RECEIVED	JUN 28	Account Name : COMPUTERSHARE Account Number : 110432003053 HOT Phone : (561)694-8107 Fax Number : (561)214-8442	
		**Enter the email address for this business entity to be used for futures of the second secon	
	2824	B≧≧ LLC REGISTERED AGENT CHANGE	

SOUND SPECIALISTS OF FLORIDA LLC

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K. SALY

JUL - 1 2024

## 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.

2. (a)	12620 Farmington Court		(b) 12620 Farmington Court				
. (uj	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Jacksonville, FL 32246		Jacksonvil	nville. FL 32246			
	06/15/2023	L	L23000289284				
3. 5. (a)	Date of filing/registration in Florida LEGALINC CORPORATE SERVICES INC.	4.		Document number		<u> </u>	
	Registered Agent and Registered Office shown on the record 476 Riverside Ave.	- e:					
	Registered Office Address <u>(MUST BE FLORIDA STRE</u>	<u>ET ADDRESS)</u>		-			
	Jacksonville	, FL		-	2024 JUN 28	T	
(b)	Corporate Creations Network Inc.			_	JUN 28 AH 3: 32	ILED	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ered Office addi	<u>ress</u> :	-	3 MM 3: 32 SEC. FLORID	C	
	801 US Highway 1			_	01010 0110 3:3	-	
	<u>NEW</u> Registered Office Address:					,	
	North Palm Beach	, FL		-			
change agent v was/w	imited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membe icles of organization or the operating agreement of	haws of the S the registered d liability com rs of the limit	l office an pany, it is ed liabilit	d the business office s hereby confirmed t y company or as oth	of the registere that the change(s	d )	
	Kristen Espinales	Kriste	n Espinale	s, Attorney-in-Fact			

Signature of a member or authorized representative of a member

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.

Kristen Espinales Kristen Espinales, Special Secretary

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00