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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*Enter the email address for this business entity to be used for future யத்தியைவு report mailings. Enter only one email address please.\*\* | The il Address:

> LLC REGISTERED AGENT CHANGE LA PROMESA MUSIC PUBLISHING, LLC

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## COVER LETTER

TO: Registration Section Division of Corporations	·				
La Promesa Music Publishing,	LLC '				
SUBJECT: Name o	f Limited Liability Company				
Dear Sir or Madam:					
The applicant Deviation of Access (Deviation of ACC)	Change and E. Caron and the last of the Change				
The enclosed Registered Agent/Registered Office	Change and rec(s) are submitted for fitting.				
Please return all correspondence concerning this m	natter to the following:				
Erika A. Easter					
Name of Person	<del></del>				
Ungerlaw PC/ eMinutes					
Firm/Company					
11726 San Vicente Blvd., Suite 480					
Address					
Los Angeles, CA 90049					
City/State and Zip Code					
Eteam@eminutes.com E-mail address: (to be used for future annual	report notification)				
For further information concerning this matter, ple	ase call:				
Erika A. Easter	n ( <u>310</u> ) <u>820-1000</u>				
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				
INHS18 (2/14)					

## 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	ame of the limited liability company: La Promes	sa mu	SIC PI	Applishing, LLC	
2. (a)	Principal office address of limited liability company;		(b)	o)	
	( <u>Note: MUST BE STREET ADDRESS</u> )			Mailing address of limited liability com (Note: MAY BE POST OFFICE B)	
	18326 Kinzie Street			18326 Kinzie Street	
	Northridge, California 91325			Northridge, California 91325	
	June 22, 2023			L23000301663	
3.	Date of filing/registration in Florida		٦	Document number	
5. (a)					
	Registered Agent and Registered Office shown on the records THE HACHAR LAW GROUP	s of the l	Florida	i Dept, of State:	
	Registered Office Address (MUST BE FLORIDA STREE	ET ADE	ORESS)	<u></u> ù	
	7900 OAK LANE, SUITE 401				
	Miami Lakes	FI :	33016	5	
(b)	eResidentAgent, Inc.				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Off	ice add	dress:	3 D
	801 US Highway 1				
	NEW Registered Office Address:			1	
					•
			,		
	North Palm Beach	FL	3340	80	
the cha agent w was/we	imited liability company is not organized under the nge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member clos of organization or the operating agreement of the second control of the operating agreement of the operat	s of the I liabil rs of th	regist ity con ie limi	stered office and the business office of the rompany, it is hereby confirmed that the characted liability company or as otherwise proving	egistered ige(s)
			Eril	ika A. Easter, Authorized Person	
_	ure of a member or authorized representative of a member			Printed or typed name of signee	
provision the obli to mere	w accept the appointment as registered agent and a consoft all statutes relative to the proper and completigations of my position as registered agent as provide reflect a change in the registered office address, I in writing of this change.	agree i ete per ided jö , I here	to act i forma or in Ci zby coi	in this capacity. I further agree to comply unce of my duties, and I am familiar with a hapter 605, F.S. Or, if this document is be onlirn that the limited liability company ha	with the nd accept ring filed s been
Signan	North Resident Agent				