

MO1000001704

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

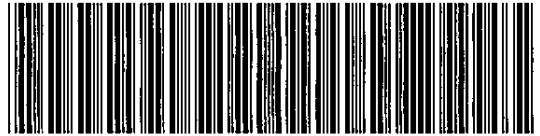
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TALLAHASSEE, FLORIDA

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T. CLINE
6-24-09
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ascent Media Systems & Technology Services, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michele Tully
Name of Person
National Service Source, Inc.
Firm/Company
9145 Ellis Rd
Address
Melbourne, FL 32904
City/State and Zip Code
michele.tully@ussi.org
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Michele Tully at (321) 723-5395 x135
Name of Person Area Code and 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

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☒ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Ascent Media Systems and Technology Services, LLC

2. This entity was formed under the laws of: DE

3. This entity was authorized to transact business in Florida on 07/27/2001
and its Florida document/registration number is M01000001704

4. The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM


DAVID S. CHRISTIANO

9145 ELLIS RD

MELBOURNE FL 32904

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TALLAHASSEE, FLORIDA

Required Signature: _____


Signature of Manager, Managing Member or Member

Filing Fee: \$25