## Florida Department of State Division of Coeporations Electronic Filling Cover Share 238

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	To: Division of Corporations Fax Number : (850)617-6383
1.1 4: 24	From:  Account Name : REGISTERED AGENTS INC. Account Number : I200900000081 Phone : (307)200-2803 Fax Number : (855)330-1010  **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**  Email Address:
1 - 13.1 288	LLC REGISTERED AGENT CHANGE  U STREET MUSIC HALL, LLC
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## 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

7901 4th St N STE 300 St. Petersburg FL 33702 02/14/22	7901 4th St N STE 300 St. Petersburg FL 33702
	St. Petersburg FL 33702
02/14/22	
	M22000002381
Date of filing/registration in Florida	4. Document number
(a) EASTMAN, WILLIAM	
Registered Agent and Registered Office shown on the records of t	f the Florida Dept. of State:
202 S OBRIEN STREET	
Registered Office Address (MUST BE FLORIDA STREET A	^ADDRESS)
TAMPA	7022 NOV
ь) Registered Agents Inc	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ad Office address:
7901 4th St N	
NEW Registered Office Address:	
STE 300	14. 14.

Riley Park 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.

Bill Havre Assistant Secretary

Signature of Registered Agent