

N31 UUUUUU5451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

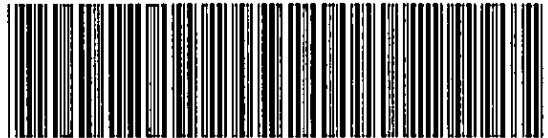
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2022 DEC 28 PM 3:12

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Sound Check Foundation
Name of Corporation

DOCUMENT NUMBER: N21000008451

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Erin McLean
Name of Contact Person

The Sound Check Foundation
Firm/Company

1133 NW 41st Lane
Address

Lauderhill, FL 33313
City/State and Zip Code

erin@soundcheck-foundation.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erin McLean at (954) 605-8836
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 18, 2022

THE SOUND CHECK GROUPD
150 S PINE ISLAND RD, STE 300
PLANTATION, FL 33324

SUBJECT: THE SOUND CHECK GROUP, INC.
Ref. Number: N21000008451

We have received your document for THE SOUND CHECK GROUP, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLC, but your entity is a FLORIDA NONPROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Stacy Prather
Regulatory Specialist III

Letter Number: 522A00023334

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: The Sound Check Foundation
2. The principal office address: 150 S. Pine Island Road, Suite 300
Plantation, FL 33324
3. The mailing address (if different): _____
4. Date of incorporation/qualification: July 13, 2021 Document number: N21000008451
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

United States Corporation Agents, Inc.
5575 S. Semoran Blvd, Suite 36
Orlando, FL 32822

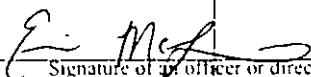
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Erin N. McLean
1133 NW 41st Lane
Lauderhill, FL 33313

P.O. Box NOT acceptable


The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of officer or director

Erin McLean
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

12/10/2022
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

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