

PO00000011313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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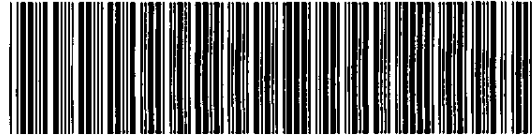
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PRODUCER ARTIST MANAGEMENT INC.
Name of Corporation

DOCUMENT NUMBER: P00000011313

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:

Pam KENNEDY
Name of Contact Person

PRODUCER ARTIST MGMT.
Firm/Company

10601 VERSAILLES BLVD
Address

WELLINGTON, FL 33449
City/State and Zip Code

PAM@PAMDIS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pam KENNEDY at (561) 628-5671
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2011

PAM KENNEDY
PRODUCER ARTIST MANAGEMENT, INC.
10601 VERSAILLES BLVD
WELLINGTON, FL 33449

SUBJECT: PRODUCER ARTIST MANAGEMENT, INC.
Ref. Number: P00000011313

We have received your document for PRODUCER ARTIST MANAGEMENT, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

THE REGISTERED AGENT MUST BE LISTED IN PART 6(SIX) OF THE FORM WHETHER OR NOT YOU ARE CHANGING THE AGENT.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 711A00017835

**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 _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PRODULER ARTIST MANAGEMENT INC
2. The principal office address: 4095 STATE RD 7, STE L-152
WELLINGTON, FL 33449
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 2/2002 Document number: P 00000011313

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)

PAM ~~KENNEDY~~ FILM-KENNEDY
~~1000 VER~~ 330 CLEMATIS ST, STE 215
WEST PALM BEACH, FL 33409

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

PAM FILM-KENNEDY
4095 STATE ROAD 7
SUITE L-152
P.O. Box NOT acceptable
WELLINGTON, FL 33449

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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.

Pam Kennedy
Pam Kennedy
Signature of an officer or director

Pam KENNEDY, PRESIDENT
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.

Pam Kennedy
Pam Film-Kennedy
Signature of Registered Agent

7/23/11
Date

If signing on behalf of an entity:

Typed or Printed Name

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