P00000017128

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900209363749

06/29/11--01017--024 **35.00

THE SOUND OF CORPORATED

R-A. Chq.

C.COULLIETTE

JUN 30 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Z Productions Inc. Name of Corporation
DOCUMENT NUMBER: POODOO17128
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:
Chris Wescott Name of Contact Person
Z Productions, Inc.
105th Street North
Saint Petersburg, FL 33701 City/State and Zip Code 0
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Chris Wescott at (813) 404-2606 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

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: Z Productions, Inc. 2. The principal office address: 10 5th Street North #246
Saint Petersburg, FL 33701 3. The mailing address (if different): SAME
4. Date of incorporation/qualification: 02/14/2000 Filed Document number: Poddo 17126
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)
Christopher M. Wescott 155 14th Avenue N.E. Saint Petersburg, FL 33701
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Christopher M. Wescott 10 5 th Street North #246 P.O. Box NOT acceptable
Saint Petersburg, FL
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. 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.
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. Object Date Date
If signing on behalf of an entity: Christopher M. Wescott Typed or Printed Name

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