P0100000362

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SECRETARY OF STATE
SECRETARY OF STATE

Or March

COVER LETTER

TO: Amendmen Division of	t Section Corporations					
SUBJECT: Pro Audio Services, Inc.						
	Name of Co	prporation				
DOCUMENT NUI	MBER: PO10	000000362				
The enclosed Stater	nent of Change of Registered Office	/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:						
•		Ţ.				
Christopher Bertler						
	Name of Con	tact Person				
Pro Audio Services, Inc.						
	Firm/Co.	mpany				
	3195-A Commo					
	Addr	ess				
	North Port, FI City/State and	34289-9354 d Zin Code				
City/State and Zip Code						
proaudioservices@earthlink.net						
E-mail address: (to be used for future annual report notification)						
For further informa	tion concerning this matter, please ca	all:				
	Dawn Bertler	at (941) 764-6464 Area Code & Daytime Telephone Number				
Nam	ne of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.						
	Mailing Address:	Street Address:				
	Amendment Section	Amendment Section				
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building				
	. 10. 501 0527	Olition Dallamb				

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flor inge is submitted for a corporation organized under the laws of the State r to change its registered office or registered agent, or both, in the State	of Flo	orida	<u> </u>	_
1. The name of t	the corporation: Pro Audio Services, Inc.				
2. The principal	office address: 3195-A Commerce Parkway				
	North Port, FL 34289-9354				
3. The mailing a	ddress (if different): SAME				
4. Date of incorp	poration/qualification: 01/01/2001 Document number:	PO	100000	036	2
	I street address of the current registered agent and registered office on fil tment of State: (If resigned, enter resigned)	e with	the		
	Dawn Bertler				
	1481 Market Circle Unit 9		TALL SEC	09.	
	Port Charlotte, FL 33953		AHA		נד
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registere	d office	ARY OF ST SSEE, FLO	20 AM 9:	ILED
	Dawn Bertler		ORIC ORIC ORIC ORIC ORIC ORIC ORIC ORIC	25 ::	
	3195-A Commerce Parkway P.O. Box NOT acceptable		>```		
	North Port, FL 34289-9354				
The street address changed will	ess of its registered office and the street address of the business office be identical.	of its	registere	d age	nt,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or be board, or the corporation has been notified in writing of the change	y an o	fficer so		
Signatu	Christopher re of an officer or diffector Printed or typed name	F Ber	tler		_
I hereby accept I further agree of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity to comply with the provisions of all statutes relative to the proper and all am familiar with and accept the obligation of my position as reging filed merely to reflect a change in the registered office address, I is been notified in writing of this change.	, I comp stered hereby	lete perf agent. C confirm	orma or if t that i	nce this the
Dau	x Bertley) 07/16/20	009			
Sig	nature of Registered Agent Date				_ -
If signing on be	chalf of an entity:				
	Dawn Bertler yped or Printed Name				
1	* * * FILING FEE: \$35.00 * * *				

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