P04-000064052

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Sta	itu s
Special Instructions to Filing Officer:	
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PA Change 1-7-11

eResidentAgent, Inc.

12121 WILSHIRE BOULEVARD SUITE 1201 LOS ANGELES, CA 9 0 0 2 5

e-mail: katherine@eminutes.com

December 28, 2010

VIA FEDEX

Amendment Section
DIVISION OF CORPORATIONS
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re:	Statement of Change of Registered Agent	
Enclosure:	Statement of Change of Registered Agent for Seether Touring, Inc	
	For your handling.	
<u>Please</u> :	Review.	
	File and return confirmed copy to our office.	

Additional Remarks: Please handle the attached Statement of Change of Registered Agent for Seether Touring, Inc. Kindly send us the Tax Clearance Certificates via Fed Ex Account # 222974631 via 2 day delivery. If you have any questions, please feel free to contact me at 310 820-1000. Thank you for your assistance.

Sincerely,

Entity Process Coordinator

for

eResidentAgent, Inc.

EE/kc

COVER LETTER

SUBJECT: Seether Touring, Inc. Name of Corporation DOCUMENT NUMBER: P0400064052 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filit Please return all correspondence concerning this matter to the following: Katherine Carey	ling.
DOCUMENT NUMBER: P0400064052 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filit Please return all correspondence concerning this matter to the following: Katherine Carey	ling.
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filit Please return all correspondence concerning this matter to the following: Katherine Carey Name of Contact Person eResidentAgent, Inc. Firm/Company 12121 Wilshire Blvd., Suite 1201 Address Los Angeles, CA 90025 City/State and Zip Code	ling.
Katherine Carey Name of Contact Person eResidentAgent, Inc. Firm/Company 12121 Wilshire Blvd., Suite 1201 Address Los Angeles, CA 90025 City/State and Zip Code	ling.
Katherine Carey Name of Contact Person eResidentAgent, Inc. Firm/Company 12121 Wilshire Blvd., Suite 1201 Address Los Angeles, CA 90025 City/State and Zip Code	
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Address Los Angeles, CA 90025 City/State and Zip Code	
Address Los Angeles, CA 90025 City/State and Zip Code	
Los Angeles, CA 90025 City/State and Zip Code	
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katherine@eminutes.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Katherine Carey at (310) 570-9	-9050
Katherine Carey at (310) 570-9 Name of Contact Person Area Code & Daytime Telephone	hone 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 Of	as

Tallahassee, FL 32301

TO:

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 t	the corporation: Seether Touring, Inc.
2. The principal	office address: 16830 Ventura Boulevard, Suite 501
	Encino, CA 91436
3. The mailing a	address (if different):
4. Date of incom	poration/qualification: April 19, 2004 Document number: P0400064052
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Capitol Corporate Services, Inc.
	155 Office Plaza Drive, Suite A
	Tallahassee, FL 32301
6. The name and (if changed):	Tallahassee, FL 32301 d street address of the new registered agent (if changed) and /or registered office 3
	Registered Agent Legal Services, LLC
	155 Office Plaza Drive, Suite A
	P.O. Box NOT acceptable Tallahassee, FL 32301
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.
	Gray Haber. Secre.
_	re of an officer or director Printed or typed name and little
I hereby accept the I further agree to of my duties, and document is being corporation has be	he appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete performance I am familiar with and accept the obligation of my position as registered agent. Or, if this g filed merely to reflect a change in the registered office address, I hereby confirm that the
120M	ture of Registered Agent 8 ' 35 () Date
f signing on beha	alf of an entity:
Denis	E TOWIER
Туре	ed or Printed Name

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