PO7000086737

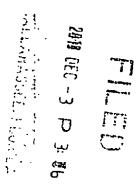
(Red	questor's Name)			
(Add	dress)			
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(City	y/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
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COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Selig Multimedia, Inc. Name of Corporation					
SUBJECT: Name of Corporation					
P007000086737					
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.					
The enclosed Statement of Change of Registered Office Agent Statement					
Please return all correspondence concerning this matter to the following:					
Mike Sonnenschein					
Name of Contact Person					
Sonnenschein Law, P.A.					
Firm/Company					
801 International Parkway, Suite 50					
Address					
Lake Mary, FL 32746					
City/State and Zip Code					
mikesonnlaw@gmail.com					
E-mail address: (to be used for future annual report notification)					
E-mail address. (to be used for farmer)					
For further information concerning this matter, please call:					
Mike Sonnenschein at (407)801-8529 Area Code & Daytime Telephone Number					
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

statement of c	hange is submitted for a corporati	617.0302, 607.1308, or 617.1508, Flo on organized under the laws of the Sta or registered agent, or both, in the Sta	te of Florida
	O 11 A4 14		te of Florida.
	0050 11 11	imedia, Inc.	
2. The princip	al office address: 3853 North	dale Boulevard, Suite 363,	Tampa, FL 33624
3. The mailing	g address (if different):		
4. Date of inco	orporation/qualification: July 31	, 2007 Document number: PO	7000086737
5. The name at		istered agent and registered office on f	
	Resigned		
			
6. The name ar (if changed):	nd street address of the new registe	red agent (if changed) and /or registere	ed office
	Sonnenschein Law, P.	A	231
	801 International Parky		
	Lake Mary, FL 32746	Box NOT acceptable	الما الما الما
The street addr	ess of its registered office and the	street address of the business office	of its registered agent,
Such change was authorized by the	as authorized by resolution duly a he board, or the corporation has b	dopted by its board of directors or by een notified in writing of the change.	an officer so
Signatu	are of an officer ordifrector	Charyn Selig, Presid	ent
performance of	my dution and I - f	Printed or typed name an ent and agree to act in this capacity, ill statutes relative to the proper and a and accept the obligation of my posi to reflect a change in the registered of ified in writing of this change.	complete
Sign	nature of Registered Agent	10/16/1	8
	half of an entity:	Dute	
Mike Sonne			
Ту	rped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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