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SEGRETARY OF STATE OF STATE OF CORPORATIONS



## COVER LETTER

TO: Amendment Section Division of Corporations

INFINITY SIGHT & SOUND, INC.

Name of Corporation

P07000126363

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:

MICHAEL SELLERS

Name of Contact Person

INFINITY SIGHT & SOUND, INC.

Firm/Company

24510 REDFISH STREET

BONITA SPRINGS, FL 34134

City/State and Zip Code

kckids45@embargmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person

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, 617.0 statement of change is submitted for a corporation or in order to change its registered office or reg	
1. The name of the corporation: INFINITY SIGH 2. The principal office address: 1218 ALBEMAR	T & SOUND, INC. RLE CIRCLE
LEHIGH ACRES, FL 33936  3. The mailing address (if different): SAME AS A	BOVE
4. Date of incorporation/qualification; 11/18/200	7
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resigned)	<del>-</del>
MICHAEL SELLERS	
1218 ALBEMARLE CIRCL	.E
LEHIGH ACRES, FL 3393	12 T
6. The name and street address of the new registered a (if changed):	
MICHAEL SELLERS	T CORROLL STATES
24510 REDFISH STREET	जार है
BONITA SPRINGS, FL 34	
The street address of its registered office and the stras changed will be identical.	eet address of the business office of its registered agent,
Such change was authorized by resolution duly adopauthorized by the board, or the corporation has been	oted by its board of directors or by an officer so inotified in writing of the change.
Signature of an officer or director	MICHAEL SELLERS, PRESIDENT Printed or typed name and title
\$ F	t and agree to act in this capacity. statutes relative to the proper and complete and accept the obligation of my position as registered reflect a change in the registered office address, I ed in writing of this change.
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Typed or Printed Name	FEE. 225.00 + + +
" " " FILING	FEE: \$35.00 * * *

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