## P0900028339

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## COVER LETTER

TO:	Amendment S Division of C							
SUBJECT: Absolute Music Publishing, Inc. Name of Corporation								
DOCU	JMENT NUM	BER: PO	9000028339					
The er	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:								
		Jennil	er Morales					
		Name of	Contact Person					
Absolute Music Publishing, Inc								
		,rim	/Company					
		ED42 Normand	. Davida cand Cuita 7					
	_		y Boulevard, Suite 7					
		•						
		lacksonville	- Florida 32205					
	_	City/State	e, Florida 32205 and Zip Code					
	<u></u>		olutemusicpublishing.co					
E-mail address: (to be used for future annual report notification)								
For fu	rther informatio	on concerning this matter, pleas	se call:					
		•						
		bara Snellgrove of Contact Person	at (904)	783-1881 time Telephone Number				
	Name	of Contact reison	Area Code & Dayt	ume relephone 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 S Division of C Clifton Buildi 2661 Executiv Tallahassee, I	ection orporations ing ve Center Circle				

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTTLE FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617. nge is suhmitted for a corporation or r to change its registered office or reg	ganized under the laws of th	ne State of Florida			
1. The name of t	he corporation: Absolute Music	c Publishing, Inc				
2. The principal office address: 5913 Normandy Boulevard, Suite 7  Jacksonville, FL 32205						
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification: 3/27/0	9 Document numbe	r: P09000028339			
	street address of the current registers tment of State: (If resigned, enter resi		e on file with the			
	Corporation Service Compar	у				
	1201 Hays Street					
	Tallahassee, FL 32301		SECRETAL SECRETARY SECRETA			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	Jennifer Morales					
	5913 Normandy Blvd. Suite 7	NOT acceptable	D 2: I4			
	Jacksonville, FL 32205	****				
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 the	s authorized by resolution duly ado the board, or the corporation has been	pted by its board of directon notified in writing of the	ors or by an officer so change.			
Signatur	e of an officer or director	Don Sne	llgrove, Director			
I further agrée l of my duties, an document is bei	the appointment as registered agen o comply with the provisions of all : d I am familiar with and accept the ng filed merely to reflect a change i been natified in writing of this chai	statutes relative to the prop obligation of my position a n the registered office addi	apacity. per and complete performance as registered agent. Or, if this ress, I hereby confirm that the			
(dr	2/3/2010					
/ /	nature of Registered Agent half of an entity:		Date			
	rped or Printed Name		× *			

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