P140000 49698

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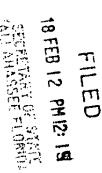
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Clear Vision and Sound, Inc.
Name of Corporation

DOCUMENT NUMBER: P14000049698

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:

Daniel Hernandez, OD

Name of Contact Person

Clear Vision and Sound, Inc.

Firm/Company

12343 NW 27th PL

Address

Coral Springs, FL 33065

City/State and Zip Code

drdanielhernandez od @ gahoo. com

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

For further information concerning this matter, please call:

Daniel Hernandez, OD

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

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 the corporation: Clear Vision and Sound, Inc.	
2. The principal office address: 123 H3 NW 27 th PL Coral Springs, FL 33 065	
3. The mailing address (if different):	_ _
4. Date of incorporation/qualification: 06 05 2014 Document number: P1400004960	- 18
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
Daniel Hernandez, OD	
MI8INW 88th Ave	
Sunrise, FL 33351	
Sunrise, FL 33351 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Daniel Her nandez, OP	
123 43 NW 27 th PL P.O. Box NOT acceptable	
Coral Springs, FL 33065	-
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 resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Signature of an officer or director Printed or typed name and title	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Daniel 18 02/07/18	
Signature of Registered Agent Date	
If signing on behalf of an entity: Daniel Hernandez100	
Typed or Printed Name	

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

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