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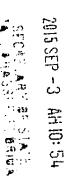
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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT. American Radio Connection, Inc.

Name of Corporation

DOCUMENT NUMBER, P14000071

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:

Ryan Russell

Name of Contact Person

American Radio Connection, Inc.

Firm/Company

7275 Waelti Dr., Suite 1

Address

Melbourne, FL 32940

City/State and Zip Code

americanradioconnection@gmail.com

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

For further information concerning this matter, please call:

Ryan Russell

,321

4126450

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 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.
I. The name of the corporation: American Radio Connection, Inc.
2. The principal office address: 7275 Waelti Dr., Suite 1
Melbourne, FL 32940
3. The mailing address (if different):
4. Date of incorporation/qualification: 8/26/14 Document number: P14000071168
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)
Resigned
Tresigned
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6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Ryan Russell
7275 Waelti Dr., Suite 1
P.O. Box NOT acceptable Melbourne, FL 32940
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.
Sparatury of aporticer 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.
1/25/2015
Signature of Registered Agent/ Date
If signing on behalf of an entity:
Typed 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 * * *