## P16000057658

(Reques	stor's Name)	
(Addres	s)	
(Addres	s)	
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PICK-UP	WAIT	MAIL
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## COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: True Feathers Music 16c.  Name of Corporation	
DOC	UMENT NUMBER: P1600050658	
The e	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Name of Contact Person  True Feathers Music inc.  Firm/Company	
True Feathers Music inc.		
	74. NE 150th St Address	
	Minmi, FL 33/6/ City/State and Zip Code	
	E-mail address: (to be used for future annual report notification)	
	rther information concerning this matter, please call:	
	Name of Contact Person at (33161), 786 269 344.6  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

I

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: True teathers Muric, inc.
1. The name of the corporation: The Feathers Muricina.  2. The principal office address: 74NE 150th St Minmi FL 33/61
3. The mailing address (if different):
•
4. Date of incorporation/qualification: 6/9/16 Document number: P160006.50658
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).
rionda Department di State: (il resigned).
United > 76/65 Corpor Agents inc.
United States corport Agents inc.  13302 Winding Oak Court Suite A  Tampa FL 336)2
Tampa El 33612
· · · · · · · · · · · · · · · · · · ·
6. The name and street address of the new registered agent (if changed) and /or registered office [1]
(if changed):
79 NF 150 th S7 mismi FL 33161
P.O. Box NOT acceptable
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  Tacub George 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
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.
Signature of Registered Agent 15/19/17 Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

CR2E045 (03/12)

Make CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
(2)