P17000048933

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ALLAHASSEE, FLORID,

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I ALBRITTON

COVER LETTER

TO:	Amendment Section Division of Corporations				
SUBJ	Lumina Productions, Inc Name of C	orporation			
		orporation			
DOCU	P17000048933 JMENT NUMBER:				
The er	iclosed Statement of Change of Registered Offic	e/Agent and fee are submitted for filing.			
Please	return all correspondence concerning this matte	r to the following:			
	Stephen Lasky				
	Name of Co	ntact Person			
	Lumina Productions, Inc.				
	Firm/Company				
	235 20th Ave. SE				
	Add	ress			
	St. Petersburg, FL 33705				
	City/State ar	d Zip Code			
	stevelasky@mac.com				
	E-mail address: (to be used for fi	uture annual report notification)			
	ther information concerning this matter, please of				
Steph	nen Lasky	at (727 321-3436 Area Code & Daytime Telephone Number			
	Name of Contact Person	Area Code & Daytime Telephone Number			
Enclos	ed is a \$35.00 check made payable to the Depart	ment of State.			
	Mailing Address: Amendment Section	Street Address: Amendment Section			
	Division of Corporations	Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	-	02, 617.0502, 607.1508, or 617.1508, Florida Statutes, this attion organized under the laws of the State of Florida			
-	•	ve or registered agent, or both, in the State of Florida.			
1. The name of	the corporation: Lumina Pro-	ductions, Inc.			
2. The principa	2. The principal office address: 235 20th Ave. SE, St. Petersburg, FL 33705				
3. The mailing	address (if different):				
4. Date of incom	rporation/qualification: June 2	2, 2017Document number: P17000048933			
	nd street address of the current r artment of State: (If resigned, er	registered agent and registered office on file with the nter resigned)			
	LEGALCORP SOLUTIO	ONS, LLC			
	3440 W Hollywood Blvd	Suite 415			
	Hollywood, Florida 3302	SECR ALL.			
6. The name an (if changed):	-	istered agent (if changed) and /or registered office			
	Stephen Lasky	etersburg, FL 33705			
	235 20th Ave. SE St. Pe	etersburg, FL 33705			
		P.O. Box NOT acceptable			
		the street address of the business office of its registered agent,			
authorized by	the board, or the corporation has	ally adopted by its board of directors or by an officer so as been notified in writing of the change.			
when	~) · &/	Catherine S. Lasky			
I hereby accept I further agree performance of agent. Or, if th	to comply with the provisions f my duties, and I am familiar his document is being filed mer	Printed or typed name and title d agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registered rely to reflect a change in the registered office address, I notified in writing of this change.			
,	Stu	06/04/2018			
	gnature of Registered Agent	Date			
If signing on be	ehalf of an entity:				
Stephen Las	<u> </u>				
٦	Fyped or Printed Name *** FT	ILING 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)