P93000025040

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TO:

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: American Country Productions Inc of Corporation	
DOC	UMENT NUMBER: P93000025040	
The er	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
Grant	Austin	
Name	Austin of Contact Person	
	ican Country Productions Inc	
	Company	
765 C	ordova Ave	
Addre	rss	
Ormoi City/S	nd Beach, FL 32174 state and Zip Code	
E-ına	il address: (to be used for future annual report notification)	
For fu	rther information concerning this matter, please call:	
Grant	Austin at (678) 524-3205 Name of Contact Person Area Code & Daytime Telephone Number	_
Enclo	sed is a \$35.00 check made payable to the Department of State.	
	Mailing Address: Amendment Section Street Address: Amendment Section	

Amendment Section **Division of Corporations**

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

ursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this attement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.	
The name of the corporation: American Country Productions Inc	
The principal office address: 765 Cordova Ave, Ormond Beach, FL 32174	
The mailing address (if different): 765 Cordova Ave, Ormond Beach, FL 32174	
Date of incorporation/qualification: 04/01/1993 Document number: P93000025040	
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)	
Hall Hill (resigned)	
3044 Joe Johns Road	
Middleburg, FL 32068	
The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Grant Austin	
765 Cordova Ave P.O. Box NOT acceptable	
Ormond Beach, FL 32174	
he street address of its registered office and the street address of the business office of its registered ags changed will be identical. uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.	ent,
uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.	
Signature of an officer or director Grant Austin, President Printed or typed name and title	:
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete perform f my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if ocument is being filed merely to reflect a change in the registered office address. I hereby confirm that orporation has been notified in writing of this change.	unus
11/22/2020	
Signature of Registered Agent Date Signing on behalf of an entity:	
Frant Austin 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 * * *