

P98000108462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

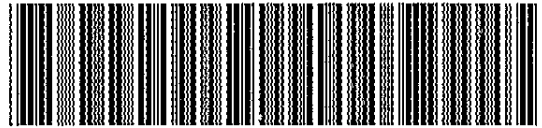
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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RA  
Change

08/07/03--01021--006 \*\*35.00

FILED

03 AUG -7 PM 4:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AOR  
8/11/03



August 4, 2003

FLORIDA SECRETARY OF STATE  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: **SIMONS MUSIC STUDIO, INC.**

Dear Filing Officer:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, for the above referenced name, which is to be filed in your office. Also enclosed is check #6248 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please contact x153 at 800-345-4647.

Thank you,

A handwritten signature in black ink, appearing to read "M. Simmons".

Myra Simmons  
Registered Agent Services  
Enclosures

PO BOX 1831  
AUSTIN, TX 78767

**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, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: SIMONS MUSIC STUDIO, INC.
2. The mailing address of the corporation is: 1708 SW 44th Street, Cape Coral, FL 33914
3. Date of incorporation/qualification: 12/30/1998 Document number: P98000108462
4. The name and address of the current registered agent and office:

NRAL Services, Inc.  
526 E Park Ave

Tallahassee, FL 32301

5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)

Capitol Corporate Services, Inc.

1333 North Duval St.

Tallahassee, FL 32303

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.

(Signature of an officer, chairman or vice chairman of the board)

(Date)

Ross D. Simons - President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Delanie Case

(Signature of Registered Agent)

8-4-03

(Date)

If signing on behalf of an entity:

Delanie Case

(Typed or Printed Name)

Asst. Sec.

(Capacity)

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