

208000009174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

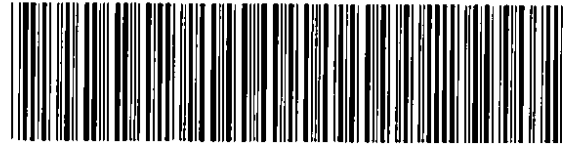
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100416565951

LLC

RA & RO change

OCT 11 PM 12 20

FILED

2023 OCT 11 PM 4:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

A. RAMSEY

OCT 12 2023



115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
P: 866.625.0838  
F: 866.625.0839  
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 10/11/2023

Name: Juliana

Reference #: 2149581

Entity Name: CROSS MEDIA, LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other \_\_\_\_\_

Authorized Amount: \$25.00

Signature: Juliana Prestia

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Cross Media, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State and Zip Code

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

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person at (\_\_\_\_\_) \_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

- \$25 Filing Fee                       \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Cross Media, LLC

2. (a) 717 N Harwood Street Suite 2200 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 717 N Harwood Street Suite 2200 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

Dallas, TX 75201 Dallas, TX 75201

1/24/2008 L08000009174

3. Date of filing/registration in Florida 4. Document number

5. (a) CORPORATION SERVICE COMPANY Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1201 HAYS ST STE 101 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) TALLAHASSEE, FL 32301

FILED 2023 OCT 11 PM 12 20

(b) Cogency Global Inc. Enter name of NEW Registered Agent and/or NEW Registered Office address:

115 North Calhoun Street, Suite 4 NEW Registered Office Address: Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of Gregory Warren, member or authorized representative

Printed name of Gregory Warren, signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Helen McKean, Registered Agent