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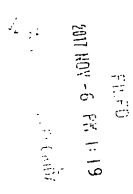
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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C. GOLDEN NOV 0 8 2017

COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Florida Newspaper Advertising and Marketing Name of Corporation DOCUMENT NUMBER: The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: H. Dean Ridings Name of Contact Person Florida Press Service Firm/Company 610 Crescent Executive Ct. Ste. 112 Address Lake Mary, Florida 32746 City/State and Zip Code vlumpkin@mediagenius.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: __at (321-_)283-5264 Area Code & Davtime Telephone Number Virginia Lumpkin Name of Contact Person Enclosed is a \$35.00 cheek made payable to the Department of State. Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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

statement of change is	submitted for a corporation organi	2, 607,1508, or 617,1508, Florida Statu ized under the laws of the State of <mark>Flori</mark> rred agent, or both, in the State of Florid	da
1 The name of the co	moration: Florida Newspaper A	dvertising and Marketing Execu	tives, Inc.
2. The principal office	address: 610 Crescent Exec	cutive Ct. Suite 112	
	lorida 32746		·
3. The mailing address	s (if different):	·	
4. Date of incorporation	on/qualification: 7/31/1981	Document number: 759401	
	t address of the current registered ag of State: (If resigned, enter resigned	gent and registered office on file with thd)	ne
Sar	ndra Osteen	<u></u>	
113	1138 Linkside Court		2017
Apo	Apopka, Florida 32712		- 40l
6. The name and stree (if changed):	t address of the new registered agen	nt (if changed) and /or registered office	FILED 2017 NOV - 6 PK 1
H. [H. Dean Ridings		: 9
610	Crescent Executive Ct.	Suite 112	
l ak	е.о.вы not se Mary, Florida 32746	acceptable	
		··	
The street address of as changed will be id	its registered office and the street a entical.	address of the business office of its reg	gistered agent.
Such change was authorized by the boa	norized by resolution duly adopted and, or the corporation has been not	by its board of directors or by an officitied in writing of the change.	rer so
arolyn	officer or director	Carolyn Klinger Director	<u> </u>
I further agree to con- performance of my di- agent. Or, if this doc	uties, and t am familiar with and ac	tes relative to the proper and complete eccept the obligation of my position as r ect a change in the registered office ad	revistered
4 Ven	of Registere Agedi	10/30/2017	
If signing on behalf of		17ate	
Typed or	Printed Name		

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