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COVER LETTER

	stration Section sion of Corporations			,		
SUBJECT:	ERJ Media, LLC					
.,6131.61.	Name of Limited Liability Company					
Dear Sir or M	dadam:					
The enclosed	l Registered Agent/Registered Office	e Chang	e and f	ee(s) are submitted for filing.		
Please return	all correspondence concerning this	matter	to the fo	ollowing:		
Shannon E	Butler					
	Name of Person			_		
ERJ Media	a, LLC					
	Firm/Company			_		
14100 SW	144TH Ave					
	Address			_		
Miami, FL	33186					
	City/State and Zip Code			_		
shannonbı	utler@elreyjesus.org					
E-mail	address: (to be used for future annua	al repor	t notific	ration)		
For further in	nformation concerning this matter, p	dease ca	ıll:			
Shannon E	Butler	at (305	398-7999 Ext 22202		
	Name of Person	(Area Code & Daytime Telephone Number		
Regi Divi Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle thassee, Florida 32301		Reg Divi P.O.	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314		
Encl	osed is a check for the following a	mount:	;			
⊿ \$:	25 Filing Fee		□ \$55	5 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.

L N	ame of the limited liability company:	ERJ Media,	LLC					
2. (a)	14100 SW 144th Ave Miami,		(b) 14100 SW 144th Ave Miami, FL 33186					
2. (4)	Principal office address of limited lie (Note: MUST BE STREET).			Mailing address of limite <u>(Note: MAY BE POS</u>	-			
3.	04/01/2004 Date of filing/registration in	ı Florida		4000025117 Document number	. <u>.</u>			
5. (a)								
(11)	Registered Agent and Registered Office shows Marianne Salazar Registered Office Address (MUST BE Formula 14100 SW 144th Ave			pt. of State:	27 100 61.7			
	Miami	t71	33186		387 PF 387 PF 38	3		
(b)	Einter name of NEW Registered Agent and Rachelle Seibane NEW Registered Office Address:	or <u>NEW Registered</u>	d Office addres	<u>\$</u> :	ALIANE STATE	F 17		
	14100 SW 144th Ave							
	Miami	, FI	L33186					
the chiagent was/w was/w the art Sana I here provis the ob- to mer	imited liability company is not organinge or changes are made, the Florida will be identical. Or, in the case of a ere authorized by an affirmative vote ieles of organization or the operating ture of a member or authorized representative by accept the appointment as registerions of all statutes relative to the profigations of my position as registered ely reflect a change in the registered of the ording of this change.	street address of Florida limited ling of the members agreement of the of a member and agent and agent as provide agent as provide	f the register iability comp of the limited liab eree to act in eree to formance of for in Cha	ed office and the business of rany, it is hereby confirmed to a liability company or as oth ility company. Printed or typed name of this capacity. I further agree to of my duties, and I am fam prer 605, F.S. Or, if this does	fice of the charthe chart charthe chart char	registered inge(s) vided in v with the and accept being filed		