6/12/2017

Division of Corporations

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803 Fax Number : (855)330-1010,

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE YES MEDIA GROUP LLC

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JUN 1 3 2017

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.

2. (a)	22161 CROFTON CT.	(b)	22161 CROFTON CT.
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company. (Note: MAY BE POST OFFICE BOX)
	BOCA RATON, FL 33428		BOCA RATON, FL 33428
	06/05/2012	Iç.	L12000074696
	Date of filing/registration in Florida	4.	Document number
(a)	UNITED STATES CORPORATION AGENT Registered Agent and Registered Office shown on the records of 13302 WINDING OAK COURT	***************************************	of State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	Α	,	
	TAMPA , FI	_ 33612	12 AV
(b)			<u> </u>
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:) # 53
	3030 N. Rocky Point Dr.		≯
	NEW Registered Office Address:		
	STE 150A	· · · · · · · · · · · · · · · · · · ·	
	Tampa , FI	33607	
e ch: gent : as/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members fields of organization of the operating agreement of the	f the registered ability compar of the limited l	I office and the business office of the registered by, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.
	nture of a member or authorized representative of a member	Riley Park Printed or typed name of signee	
Sions		-	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Signature of Reg