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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 : (561)694-8107 Phone

: (561)214-8442 Fax Number

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 **MAGE MEDIA LLC**

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MAY - 3 2022

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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.

(a) _	me of the limited liability company: MAGE MED 3104 North Armenia Avenue	(b)	3104 North Armenia Avenue
(a) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	# 2		# 2
	TAMPA, FL 33607		Tampa, FL 33607
	08/14/2014		L14000128225
	Date of filing/registration in Florida	4.	Document number
. (a)	HUNTER BUSINESS LAW		
). (u)	Registered Agent and Registered Office shown on the records of	the Florida I	Dept. of State:
	119 S. DAKOTA AVENUE		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	2
	TAMPA .FI	L336 <u>0</u>	06 <u> </u>
			<u>Jb</u>
(b)	Corporate Creations Network Inc.		
	Enter name of NEW Registered Agent and/or NEW Registere	d Office add	Idress
	801 US Highway 1		では、 第27日
	NEW Registered Office Address:		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	North Palm Beach	т 3340	
	,F	L. 3340	
change igent v was/wa	imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited let authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e registered lability cor of the limi	ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided is
	aitlin Lazarus		aitlin Lazarus, Attorney-in-Fact
	ture of a member or authorized representative of a member		Printed or typed name of signee
	by accept the appointment as registered agent and ag	gree to act	t in this capacity. I further agree to comply with lance of my duties, and I am familiar with and acc Chapter 605, F.S. Or, if this document is being fi onfirm that the limited liability company has bee