

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number (850) 617-6383

From:

ACCOUNT NAME : MELSON MULLINS RIBEY & SCARBOROUGH LEF CO

Account Number: 120100000075 Phone: (305) 373-9419

Fax Number : (305) 373-9443

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

Email Address: gisela.fasco@nelsonmullins.com

LLC REGISTERED AGENT CHANGE MEDIA PAY LLC

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September 20, 2018

FLORIDA DEPARTMENT OF STATE Division of Corporations

c/o JON A. SALE, RECEIVER
NELSON MULLINS BROAD AND CASSEL
2 SOUTH BISCAYNE BLVD 21ST FLOOR
MIAMI, FL 33131US

SUBJECT: MEDIA PAY LLC REF: L15000014245

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

WE NEED THE COMPLETE RA ADDRESS.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Janeice L Smith Regulatory Specialist II Registration Section FAX Aud. #: E18000273313 Letter Number: 318A00019630

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 opens, or both, in the State of Florida.

1 N:	ame of the limited liability company: MEDIA PAY	'LLC		
	c/o Jon A. Sale, Receiver	(b) C/d		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	("/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Nelson Mullins Broad and Cassol		Nelson Mullins Broad and Cassel	
	2 South Biscavne Blvd., 21st Floor		South Biscayne Blvd., 21st Floor	
	Miami, FL 33131	Miami, FL _33131		
	01/23/2015	L15	L15000014245	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Valentina Radchuk			
J. (a)	Registered Agent and Registered Office shown on the records	of the Florida Dep	t, of State:	
	800 NE 195th St.			
	Registered Office Address (MUST RE FLORIDA STREET ADDRESS)		* · · · · · · · · · · · · · · · · · · ·	
	#318		·	
	North Miami	33179	SET 20	
	NOTAL KIRSTI	rL	•	
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office address	<u> </u>	
			-	
	Jon A. Sale, Receiver			
NEW Registered Office Address: Nelson Mullins Broad and Cassel		·		
2 South Biscayne Blvd., 21st Floor				
	Miami	FL_33131		
the cl agent	limited liability company is not organized under the nange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member tricles of organization or the operating agreement of	laws of the Sta of the registers disability comp as of the limited the limited liab	ony, it is hereby confirmed that the change(s) il liability company or as otherwise provided in ility company.	
Jon A. Sale, Received				
Sign	nature of a member or authorized representative of a member		Printed of typen name or signed	
I her provi the o to me notif	cby accept the appointment as registered agent and islons of all statutes relative to the proper and compilisions of my position as registered agent as proverely reflect a change in the registered office addressed in writing of this change.	agree to act in lete performant ided for in Cha s, I herchy confi	this capacity. I further agree to comply with the se of my duties, and I am Jamillar with and uccept spter 605, F.S. Or. if this document is being filed irm that the limited liability company has been	
Sign	artire of Registered Again	() Day 62774	Tallabassee, FL 32314	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				