## Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000329097.3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone

: (307)200-2803 : (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.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE TEMPUS AERIAL MEDIA LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Fleetronic Filing Menu — Corporate Filing Menu

 $14\phi h_{\Sigma}$ 

## 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.

1. N	Name of the limited liability company: TEMPUS AERIAL MEDIA LLC .				
2. (a)	337 NEW WATERFORD PL	45 337 NE	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
4. (4)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)				
	LONGWOOD, FL 32779	LONG	WOOD, FL 327	779	
	·				
	11/04/2016	L160002	203476		
3.	Date of filing/registration in Florida	<b>4</b> .	Document number		
5. (a)	LEGALING CORPORATE SERVICES, INC	C.		No.	
	Registered Agent and Registered Office shown on the records	of the Florida Dept. of State	: · · ·		
	5237 SUMMERLIN COMMONS		:	86	
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	•		
	SUITE 400		• •	5	
	FORT MYERS			ā 5	
(b)	Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW Register			 ගු	
	3030 N. Rocky Point Dr.				
	NEW Registered Office Address:				
	STE 150A				
	Tampa	<sub>FL</sub> 33607			
the ch agent was/w the art	firmited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member ieles of organization or the operating agreement of the contract of the	laws of the State of Flo of the registered office Hiability company, it is s of the limited liability	e and the business of s hereby confirmed y company or as oth apany.	ffice of the registered that the change(s) serwise provided in	
	nure of a member or authorized representative of a member		Printed or typed name	_	
provis the ob to mer nogific	thy accept the appointment as registered agent and a tions of all statutes relative to the proper and completigations of my position as registered agent as provisely reflect a change in the registered office address, discipling of this change.  Bill Havre - Assista	ete performance of $mv$ .	duties, and Lain ian	uliar with and accept	
Signati	are of Registered Agent	•			