## L17000 224 955

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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**3**.B



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 132804 8432043				
AUTHORIZATION:				
COST LIMIT : \$ 25.00				
ORDER DATE: November 15, 2023				
ORDER TIME : 7:57 AM				
ORDER NO. : 132804-002				
CUSTOMER NO: 8432043				
CHANGE OF AGENT				
NAME: DIGITAL MEDIA INVESTMENTS LLC				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Alexxis Weiland-sorenson EXT#				

EXAMINER:

## 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	ame of the limited liability company: DIGITAL MEDI	DIA INVESTMENTS LLC	
2. (a)		(b)	
`,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	:
	613 NORTHLAKE BLVD 4	613 NORTHLAKE BLVD 4	
	· ·	<del></del>	
	NORTH PALM BEACH, FL 33408	NORTH PALM BEACH, FL 33408	
	10/30/2017	L17000224953	
3.	Date of filing/registration in Florida	4. Document number	
5. (a)	Specialty Resource Services LLC		
J. (u)	Registered Agent and Registered Office shown on the records o	of the Florida Dept. of State:	
	7750 OKEECHOBEE BOULEVARD		
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS)	
	SUITE #4-768		
	WEST PALM BEACH	33411	
		:L	
(b)			
(b)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address:	
	Corporation Service Company		
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee , F	32301	
change agent was/w	e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li	aws of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided the limited liability company.	d )
/s/	Paul Prince	Paul Prince, Authorized Person	
Signa	ture of a member or authorized representative of a member	Printed or typed name of signee	
provisi the obt to mer	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	gree to act in this capacity. I further agree to comply with e performance of my duties, and I am familiar with and ac led for in Chapter 605, F.S. Or, if this document is being f I hereby confirm that the limited liability company has bee	the cept iled n
Signatu	MC CAUDI ire of Registered Agent	Grace E. Kirby, Asst. Vice President	