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:

: REGISTERED AGENTS INC. Account Name

Account Number : I20090000081 : (307)200-2803 Phone : (855)330-1010 Fax Number

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

Email	Address:	
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LLC REGISTERED AGENT CHANGE JORDON PERKINS MEDIA LLC

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JUN 1 8 2019 Help

Electronic Filing Menu

Corporate Filing Menu

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.

l. N	Same of the limited liability company: Jordon P	Perkins Media LLC		
	2505 and Avenue Fact	(b) 2505 2nd Avenue East		
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)		
	Bradenton, FL 34208	Bradenton, FL 34208		
		110000003393		
	04/12/18	L18000092283		
3.	Date of filing/registration in Florida	4 Document number (a) -		
5 /-	LEGALINC CORPORATE SERVICES INC.			
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florida Dept of State:		
	5237 SUMMERLIN COMMONS			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		
	Suite 400			
	FORT MYERS .FI	L33907		
(b	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered 7901 4th St N NEW Registered Office Address. STE 300	d Office address.		
	St. Petersburg	L <u>33702</u>		
the c agen was/ the a	hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liwere authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	Riley Park		
	mature of a member or authorized representative of a member	Printed or typed name of signee		
the connatif	issions of an stanties retaine to the proper and Complete obligations of my position as registered agent as provide erely reflect a change in the registered office address, I Ged'in syriting of this change.	gree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and accel led for in Chapter 605, F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been ant Secretary		