Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (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 PGAM MEDIA, LLC

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MAY 0 3 2023 K. Brumbley

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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.

| 2. (a) | | (b) | |
|------------------------------|--|---|---|
| (, | Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | 08/06/2021 | | 21000356555 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (a) | | | |
| | Registered Agent and Registered Office shown on the records of | the Florida De | pt. of State: |
| | 360 CENTRAL AVE STE 800 | | |
| | Registered Office Address (MUST BE FLORIDA STREET | <u>ADDRESS)</u> | |
| | ST. PETERSBURG , FI | 33701 | |
| (b) | Registered Agents Inc | | 2023 HAY - 2 |
| , , | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> | t Office addres | ₩ · |
| | 7901 4th St N | | 2 7. |
| | NEW Registered Office Address: | | |
| | STE 300 | | 7: 34 |
| | St. Petersburg , F | 33702 | |
| the cha agent v was/wa | imited liability company is not organized under the la inge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited l ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the | f the register lability comp of the limited | ed office and the business office of the registered cany, it is hereby confirmed that the change(s) I liability company or as otherwise provided in |
| Ru | him way | Robin | Jones |
| Signa | ture of a member or authorized representative of a member | | Printed or typed name of signee |

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts - Assistant Secretary Signature of Registered Agent