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 : REGISTERED AGENTS INC.

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

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LLC REGISTERED AGENT CHANGE ABYSS MEDIA LLC

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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.

Florida. 1. Name of the limited liability con	npany: Abyss M	edia			
2. (a) Principal office address of line (Note: MUST BE ST			(b)	Mailing address of limited (Note: MAY BE POS)	
12/15/2021 3. Date of filing/registr	etion in Florida			00527596	
5. (a) VERDURA, BRANDO		,,		TAX MILLION HORIZON	
Registered Office Address (MU) 3915 NW 72ND DR CORAL SPRINGS (b) Registered Ager Enter name of NEW Registered Ag 7901 4th St N NEW Registered Office Address: STE 300	nts Inc	3306	65	<u>-</u> -	2022 DEC 19 AH 11: 27
St. Petersburg If the limited liability company is not the change or changes are made, the agent will be identical. Or, in the case	Florida street address of se of a Florida limited li	f the reg ability (e State of Fl pistered offic company, it i	e and the business of is hereby confirmed t	fice of the registered hat the change(s)
was/were authorized by an affirmative the articles of organization or the open signature of a member or authorized representations.	e vote of the members or trating agreement of the	of the li limited	mited liabilit	ly company or as othe upany.	erwise provided in
Signature of a member of authorized repre- liberably accept the appointment as r		ree to a	ct in this can	Printed or typed name of pacity. I further agree	

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.

Bill Havre - Assistant Secretary

Signature of Registered Agent