## Florida Department of

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone Fax Number : (813)436-5206

\*Enœrthe email address for this business entity to be used for future கூற்யal report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE FIRM COMMITMENT MARKETING LLC

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12/13/2024 09:33:05 PST . To: 18506176383 Page: 2/2 Fax: 8134365206

## 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. 8	fame of the limited liability company:	MENT MAI	RKETING LLC	:
2 (a)		í	b)	
. (1	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of fimited liability company:  (Note: MAY BE POST OFFICE BOX)
	7901 4th St N STE 300		7901 4th S	it N STE 300
	St. Petersburg, FL 33702		St. Peterst	ourg, FL 33702
	12/14/22		L220005232	248
3.	Date of filing/registration in Florida	4.		Document number
5. (a	UNITED STATES CORPORATION AGENTS, INC.			
J. (a	Registered Agent and Registered Office shown on the records of	of the Florid	a Dept. of Stat	 e·
	Registered Office Address (MUST BE FLORIDA STREE	I ADDRES	<u>si</u>	<del>-</del>
(b)	JACKSONVILLE	FL_32202		
	Registered Agents Inc			2824 DE
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> 7901 4th St N	ed Office ac	<u>ldress</u> :	APPROV AND FILEC MAN MASSE
	NEW Registered Office Address:			- PA - VEU
	STE 300			. 23 23 33
	St. Petersburg, ]	33702 1		<b>.</b>
the chagent was/w the ar Sign I heroprovide the obto median state of the state of t	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the distribution of authorized representative of a member at the appointment as registered agent and a sions of all statutes relative to the proper and completely reflect a change in the registered office address.	of the regiliability control of the limited Roberts are to accurate the a	stered office ompany, it i nited liabilit liability con on Jones	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in apany.  Printed or typed name of signee acity. I further agree to comply with the
	of this change.  David Roberts - Assistant	Secretary		

Signature of Registered Agent