**Division of Corporations** 

3/25/24, 10:25 AM

Note: Please print this page and use it as a cover sheet. Type the fay audit number (shown below) on the top and footom of all pages of the document.

(f(H24000111270 3)))



Note: DO NOT has the REFRESH/RELOAD botton on your browser from this page. Doing so will generate another cover sheer,

To:

Division of Corporations · (858)617-6383 Fax Number

From:

Account Name : REGISTERED AGENTS INC

Account Number : 128096060081 Phone : (307)200-2803 Fax Number : (813)436-5205

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

Fmail Address:

## LLC REGISTERED AGENT CHANGE FORWARD GROWTH MEDIALLC

Cenificate of Status	Ö
Centified Copy	. 0
Page Count	02
Estimated Charge	\$25.00

Electronic Filling Menu Corporate Filling Menu

Help

MIR 23 2624

3/25/2024 07:39:03 PDT • 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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	Jame of the limited liability company.	1edia LLC			
2. (a)					
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	····	Mailing address of limited b	Mailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)	
	04/18/23	L23000	0191726		
3.	Date of filing/registration in Florida	4.	Document number	<del></del>	
5. (a	, UNITED STATES CORPORATION AGENTS, INC.				
2. (u)	Registered Agent and Registered Office shown on the records of				
	476 RIVERSIDE AVE.		_	202	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		2024 HAR 26	
	JACKSONVILLE	32202	<del></del>	. S :	
(b)	Northwest Registered Agent LLC			ထ္	
,	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	<del> </del>	58	
	7901 4th Si N				
	NEW Registered Office Address:		<del></del>		
	STE 300				
	St. Petersburg	33702			
the chagent was/w	limited liability company is not organized under the laviange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members exticles of organization or the operating agreement of the	the registered of the limited line in the	office and the business office, it is hereby confirmed that is bility company or as others	e of the registered tithe change(s)	
	ature of a member or authorized representative of a member	Nat Smith			
Sign	ature of a member or authorized representative of a member		Printed or typed name of s	ignee	
provi: the ol to me notifig	cby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I i yd in writing of this change.	ce to act in this performance of d for in Chapto hereby confirm	s capacity. I further agree t f my duties, and I am famili r 605, F.S. Or, if this docur that the limited liability cor	o comply with the ar with and accept nent is being filed npany has been	
شرائر ۔	Taylor Newman - Assistant Se	ecretary			

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

Signature of Registered Agent