Division of Corporations Electronic Filing Cover Sheet

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

(((H14000011542 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : HARVARD BUSINESS SERVICES,

Account Number : 120080000045

: (302)645-7400

Fax Number

: (302)645-1290

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

Email Address:

filings@delawareinc.om

LLC REGISTERED AGENT CHANGE IMEDIA LOOP LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$30.00

T. Buren JAN 16. 7014

tps://efite.sunbiz.org/scripts/efiteovn.exe

13022694705 From: Harvard Filings Teal

(((H14000011542 3)))

* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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. Name of the limited liability company: Media Loop Li	.c	
 (a) Principal office address of limited liability com (<u>Note: MUST BE STREET ADDRESS</u>) 	pany: 7050 W Palmetto Park Road Suite 15-649 Boca Raton, FL 33433	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	7050 W Palmetto Park Road Suite 15-649 Boca Raton, FL 33433	
March 24, 2011	M11000001529	SEC SEC
3. Date of filing/registration in Florida	4. Document number	OR A
5. (a) Registered Agent and Registered Office showr	on the records of the Flori	
Registered Agent:	Michael Luppowitz	To R M
Registered Office Address:	7050 W Palmetto Park Road Suite 15-649 Boca Raton, FL 33433	8: LI
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	Registered Agents Inc.	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3030 N, Rocky Point Dr. STE 150A	
	Tampa	FL,33607
If the limited liability company is not organized under confirmed that after the change or changes are made, that the business office of the registered agent will be intability company, it is hereby confirmed that the change the members of the limited liability company or as other operating agreement of the limited liability companions of the operating agreement of the limited liability companions.	he Florida street address of dentical. Or, in the case of gc(s) was/were authorized berwise provided in the artic	the registered office a Florida limited by an affirmative vote of
Michael Luppowitz Printed on typed name of signee		
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to th and I am familiar with and accept the obligations of m Chapter 605, F.S. Or, if this document is being filed a address, Thereby confirm that the limited liability com	nd agree to act in this capa e proper and complete perf y position as registered age o merely reflect a change	wity. I further agree to formance of my duties, ent as provided for in
Dan Keen -		rthe registered office vriting of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (12/13)