

M14000004968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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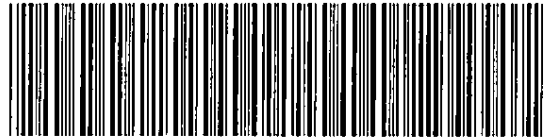
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 2025

COVER LETTER

TO: Registration Section
Division of Corporations

July 27, 2025

SUBJECT: JDPH MEDIA GROUP LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephan W. Schenk

Name of Person

Firm/Company

1775 Washington Avenue Unit 4-E

Address

Miami Beach, FL 33139

City/State and Zip Code

sws@msworldlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephan W. Schenk

305

332-8227

at ()

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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

1. Name of the limited liability company: JDPH MEDIA GROUP LLC

2. (a) 1775 Washington Avenue Unit 4-E, Miami Beach FL 33139

(Note: MUST BE STREET ADDRESS)

(b) 1775 Washington Avenue Unit 4-E, Miami Beach FL 3.

(Note: MAY BE POST OFFICE BOX)

M14000004968

3. Date of filing/registration in Florida

4. Document number

5. (a) DAZA, MARIA ELVIRA

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*

14835 SOUTH BISCAYNE RIVER DR, MIAMI, FL 33168

FL

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

Stephan W. Schenk

NEW Registered Office Address:

1775 Washington Avenue Unit 4-E, Miami Beach FL 33139

_____, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

x Jose A. Parra

Signature of a member or authorized representative of a member

JOSE D. PARRA

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.

J. Schenk

Signature of Registered Agent

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

FILING FEE: \$25.00

INHS18 (2/14)

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TALLAHASSEE, FLORIDA