

M17000003311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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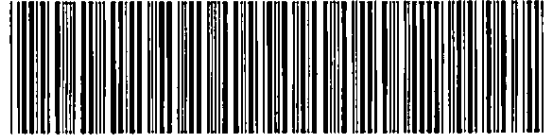
(Business Entity Name)

(Document Number)

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19 SEP -3 PM 10:53

2019 SEP -3 AM 10:43

FILED

APPROVAL

T GLASS

SEP 04 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 899920 7705174

AUTHORIZATION :

COST LIMIT : \$ 25,000



ORDER DATE : August 28, 2019

ORDER TIME : 5:15 PM

ORDER NO. : 899920-005

CUSTOMER NO: 7705174

2019 SEP -3 AM 10:43

APPROVED
AND
FILED

CHANGE OF AGENT

NAME: INSITE MARTIN STREET ADS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Roxanne Turner

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Insite Martin Street Ads 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:

Reca Porter

Name of Person

Insite Street Media

Firm/Company

200 Mansell Ct. Ste 325

Address

Roswell, GA 30076

City/State and Zip Code

rporter@insitem.com

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

For further information concerning this matter, please call:

Reca Porter

Name of Person

at (678) 743-0033

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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AND
FILED

**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. Name of the limited liability company: Insite Martin Street Ads LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

200 Mansell G E Suite 325
Roswell, GA 30076

200 Mansell G E Suite 325
Roswell, GA 30076

4/7/2017

M17000003311

3. Date of filing/registration in Florida

4. Document number

5. (a) Flutie, Glenn

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

150 NW 70th Ave Suite 5

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Plantation, FL 33317

(b) Corporation Service Company

Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

1201 Hays Street

NEW Registered Office Address:

Tallahassee, FL 32301

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.

[Signature]
Signature of a member or authorized representative of a member

Rica Porter
Printed or typed name of signer

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.

[Signature]
Signature of Registered Agent

Roxanne Turner

BY: Asst. Vice President

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

FILING FEE: \$25.00