

M17000005700

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

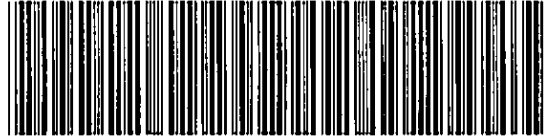
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 26, 2020

ALEXANDER GANZ
747 SW 2ND AVENUE
IMB 32 #381
GAINESVILLE, FL 32601

SUBJECT: S C A D MEDIA, LLC
Ref. Number: M17000005700

We have received your document for S C A D MEDIA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 320A00006709

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SCAD Media, 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:

Alexander Ganz
Name of Person

SCAD Media LLC
Firm/Company

747 SW 2nd Ave IMB 32 #381
Address

Gainesville, FL 32601
City/State and Zip Code

ag@scad-media.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexander Ganz at (479) 856 4082
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**

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: SCAD Media, LLC
2. (a) 747 SW 2nd Ave (b) 747 SW 2nd Ave
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
- IMB 32 #381 IMB 32 #381
Gainesville, FL 32601 Gainesville, FL 32601
- 7/5/2017 M1700005708
3. Date of filing/registration in Florida 4. Document number
5. (a) NEW Registered Agent LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
7901 4th St N
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
STE 300
St. Petersburg, FL 33702
- (b) Alexander Ganz
Enter name of NEW Registered Agent and/or NEW Registered Office address:
747 SW 2nd Ave IMB 32 #381
NEW Registered Office Address:
Gainesville FL 32601

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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

Alexander Ganz
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.

[Signature]
Signature of Registered Agent