P02000074543

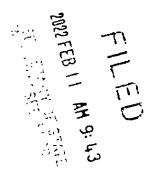
(Requestor's Name)
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A. RAMSEY FEB 2 2 2022



COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Mosaic Marketing Consulting DBA Frontline Name of Corporation	
TVMIN OF COOPORATION	
DOCUMENT NUMBER: P02000074543	
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Rachelle M. Franklin	
Name of Contact Person	
Mosaic Marketing Consulting	
Firm/Company	
21350 Falls Ridge Way	
Address	
Boca Raton, FL 33428	
City/State and Zip Code	
rachelle@frontlinemarketing.net	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	call:
Rachelle M. Franklin	at (561)441-0392 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number

Street Address:
Amendment Section
Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Mailing Address: Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute inge is submitted for a corporation organized under the laws of the State of <u>Florica</u> ir to change its registered office or registered agent, or both, in the State of Florida	ia		
= -		•		
1. The name of2. The principal	the corporation: Mosaic Marketing Consulting, Inc. office address: 21350 Falls Ridge Way, Boca Raton, FL 33428			
				
	address (if different):			
4. Date of incor	poration/qualification: July 9, 2002 Document number: P02000074543			
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)	Suc	2022	
	Corporate Creations Network, Inc.		2 FEB	7
	North Palm Beach, FU 33408	# 55 E	8	
	North Palm Beach, FL 33408	. 1 , 14	A	i l
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office		9: 43	
	Rachelle M. Franklin			
	21350 Falls Ridge Way			
	P.O. Box NOT acceptable			
	Boca Raton, FL 33428			
The street address changed will	ess of its registered office and the street address of the business office of its regis be identical.	stered a	gent,	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an office he board, or the corporation has been notified in writing of the change.	r so		
-Kalule Signatu	M. Zall Rachelle M. Franklin, re of an officer or director Printed or typed name and title	Presi	<u>100</u> 1	4 C E D
of my duties, ar d oeum ent is bei	the appointment as registered ayent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete ad I am familiar with and accept the obligation of my position as registered agen ing filed merely to reflect a change in the registered office address, I hereby con, s been notified in writing of this change.	perforn it. Or i firm tha	nance if this it the	
Lahelle	M. Zulland 2/7/2022			
Sig	mature of Registered Agent Date			
If signing on be	chalf of an entity:			
т	yped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *

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CR2E045 (04/13)