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PICK-UP	WAIT	MAIL
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(50	Unicas Linky Hall	ie)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Media Alliance //C	
	of corporation)
DOCUMENT NUMBER: P02000128870	
The enclosed Statement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Juanita Mahoney	
(Nam	e of person)
National Registered Agents, Inc.	firm/company)
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	mms vompany)
P.O. Box 927	
	Address)
West Windsor, NJ 08550	
(City/stat	e and zip code)
For further information concerning this matter, please of	zall:
Juanita Mahoney (Name of person)	at (800) 767-1553 (Area code & daytime telephone number)
(Name of person)	(Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Depart	ment of State,
Mailing Address:	Street Address:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

Pursuant to the p	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of
•	tted for a corporation organized under the laws of the State ofin order
to change its reg	zistered office or registered agent, or both, in the State of Florida.
1. The name of t	the corporation: Media Alliance, Inc.
2. The principal	office address: 100 and the 500th, Suite 400N
	5t. 104015/019, F1. 33701
3. The mailing a	ddress (if different): \(\sum_{\infty} \)
	0.2155
4. Date of incorp	poration/qualification: Q-OH-T) Document number: POSIDO 1000-E
	I street address of the current registered agent and registered office on file with the tment of State:
	Owen Rogers
	100 2nd Ave. South
	Saint Petersburg, FL 33701
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	NRAI Services, Inc.
	273 Ln Executive uPark Office, Suite 4
	(P O. Box or personal mailbox NOT acceptable)
	Weston, FL 33331
The street addre	ess of its registered office and the street address of the business office of its registered estate address of the business office of its registered estate.
Such change wa the board, or the	as authorized by resolution duly adopted by its board of directors or by an officer so authorized by a corporation has been notified in writing of the change.
\times/\bigcirc_{s}	peter Martison Pres.
veen nouytea in	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete performance of my familiar with and accept the obligation of my position as registered agent. Or, if this document is ly to reflect a change in the registered office address, I hereby confirm that the corporation has writing of this change.
NRAI Services	(Signature of Registered Agent) (Date)
	half of an entity:
Juanita	Mahoney Ass't Secretary (Typed or Printed Name) Ass't Secretary (Capacity)