

PO3000 087 959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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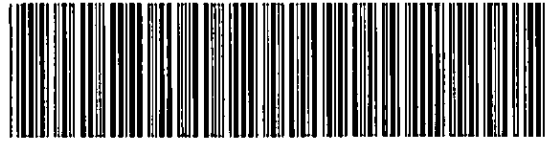
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Update Addresses for FLYTRAP MEDIA, INC.  
Name of Corporation

DOCUMENT NUMBER: P03000087959

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Greg Toth

Name of Contact Person

FLYTRAP MEDIA INC.

Firm/Company

3112 NW 107th Dr

Address

Sunrise FL 33351

City/State and Zip Code

gt@flytrapmedia.com

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

For further information concerning this matter, please call:

Greg Toth

Name of Contact Person

at ( 954 ) 394-8973

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FLYTRAP MEDIA INC.

2. The principal office address: \_\_\_\_\_  
4700 Hiatus Road STE #258 Sunrise, FL, 33351

3. The mailing address (if different): \_\_\_\_\_  
3112 NW 107th Dr Sunrise FL 33351

4. Date of incorporation/qualification: 08/08/2003 Document number: P03000087959

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Greg Toth  
4700 HIATUS RD STE 258  
SUNRISE, FL 33351

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Greg Toth  
4700 HIATUS RD STE 258  
P.O. Box NOT acceptable  
SUNRISE, FL 33351

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

\_\_\_\_\_  
Signature of an officer or director

Greg Toth  
Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

\_\_\_\_\_  
Signature of Registered Agent

11/14/19  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

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