

P10 000016796

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

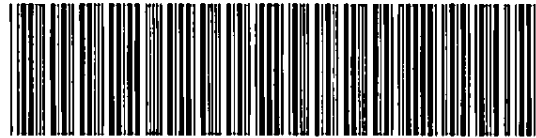
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400345478404

06/01/20--01035--010 **35.00

2020 JUN -1 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 17 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mediavine, Inc.
Name of Corporation

DOCUMENT NUMBER: P10000016796

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:

Jamie Lieberman

Name of Contact Person

Lieberman & Associates LLC

Firm/Company

1422 Grand St Unit 3E

Address

Hoboken, NJ 07030

City/State and Zip Code

legal@mediavine.com

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

For further information concerning this matter, please call:

Jamie Lieberman

Name of Contact Person

at (973) 652-8751

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Mediavine, Inc.
2. The principal office address: 160 W. Camino Real #504, Boca Raton, FL 33432
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 9-30-2004 Document number: P10000016796
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)

HOCHBERGER, ERIC

160 W. CAMINO REAL #504 BOCA RATON, FL 33432

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

Registered Agents Inc.

7901 4th St N, Ste 300, St. Petersburg, FL 33702

P.O. Box NOT acceptable

2020 JUN -1 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Eric Hochberger
Signature of an officer or director

Eric Hochberger
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.

Bill Havre
Signature of Registered Agent

5/26/20

Date

If signing on behalf of an entity:

Bill Havre

Typed or Printed Name

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

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

CR2E045 (04/13)