8/8/22, 10.00 AM

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 : (954)208-0845 Fax Number : (614)573-3996

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

REGISTERED AGENT CHANGE CURIOSITY MEDIA, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

By:

From: Lexus Wingo

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

statement of change is submitted for a corpora	12, 617.0502, 607.1508, or 617.1508, Florida Statutes, this attion organized under the laws of the State of Florida be or registered agent, or both, in the State of Florida.
1. The name of the corporation: CURIOSITY:	MEDIA, INC.
2. The principal office address: 7599 Bradfordy	rille Road
TALLAHASSEE, FL 32309	
-	
4. Date of incorporation/qualification: 11/30/2	010 Document number: P10000097725
5. The name and street address of the current r Florida Department of State: (If resigned, et	registered agent and registered office on file with the nterresigned)
CHRISTOPHER CUMMINGS	5
7599 Bridfordville Road	
TALLAHASSEE, FL 32309	
6. The name and street address of the new reg (ifchanged):	istered agent (if changed) and /or registered office
C T Corporation System	
1200 South Pine Island Road	
Plantation, Florida 33324	P.O. Box NOT acceptable
The street address of its registered office and as changed will be identical.	I the street address of the business office of its registered agent,
Such change was authorized by resolution drauthorized by the board, or the corporation h	uly adopted by its board of directors or by an officer so as been notified in writing of the change.
Promise-	Paul Mishkin CEO
Part Whather Signature of an officer or director	Printed or typed name and title
of my dulies, and I am familiar with and accordance is being filed merely to reflect a corporation has been notified in writing of the CT Corporation System.	d agent and agree to act in this capacity. s of all statutes relative to the proper and complete performance ept the obligation of my position as registered agent. Or, if this tange in the registered office address, I hereby confirm that the his change.
Land Process	08/03/2022
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Ternell Kearney-Assistant Secretary	
Typed or Printed Name	
* * * F	ILING 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)