

P110000097829

(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



200296504112


RECEIVED  
DEPARTMENT OF STATE  
17 APR 24 PM 4:50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 APR 24 AM 9:05

V HERRING

APR 25 2017

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 611950 7838690  
AUTHORIZATION :   
COST LIMIT : \$ 35.00

ORDER DATE : April 24, 2017

ORDER TIME : 3:51 PM

ORDER NO. : 611950-020

CUSTOMER NO: 7838690

CHANGE OF AGENT

NAME: MUDHOOK MARKETING, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender --. EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Mudhook Marketing, Inc.

\_\_\_\_\_  
Name of Corporation

**DOCUMENT NUMBER:** P11000097829

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:

Gidalthy Rodriguez

\_\_\_\_\_  
Name of Contact Person

DLA Piper LLP (US)

\_\_\_\_\_  
Firm/Company

200 South Biscayne Boulevard Suite 2500

\_\_\_\_\_  
Address

Miami, Florida 33130

\_\_\_\_\_  
City/State and Zip Code

Gidalthy.Rodriguez@dlapiper.com

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

For further information concerning this matter, please call:

Lance Crosby

972

822-5551

at ( )

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
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

**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: Mudhook Marketing, Inc.
2. The principal office address: 2021 McKinney Avenue, Suite 1100, Dallas, Texas 75201
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 11/10/2011 Document number: P11000097829
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)

Thomas S. Miller

807 W Morse Blvd, Suite 101

Winter Park, FL 32789

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

Corporation Service Company

1201 Hays Street

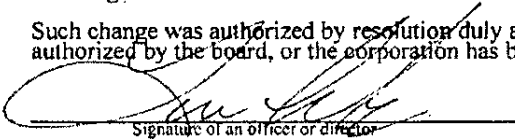
P.O. Box NOT acceptable

Tallahassee

FL 32301

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

Lance Crosby CEO

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.*

Corporation Service Company

By: Emily Croft  
Signature of Registered Agent

4/24/17  
Date

If signing on behalf of an entity:

Emily Croft  
Typed or Printed Name  
**Asst. Vice President.**

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 (03/12)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2017 APR 24 AM 9:05