

3/29/2018

Division of Corporations

PI4000102343

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6380

From:
Account Name : REGISTERED AGENTS INC.
Account Number : I200900000081
Phone : (307)200-2803
Fax Number : (855)330-1010

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

Email Address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
ON THE MAP MEDIA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 MAR 29 A 9 22

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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: ON THE MAP MEDIA, INC.
2. The principal office address: 1730 NE 10TH LANE
CAPE CORAL, FL 33909
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/29/2014 Document number: P14000102343
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)

WARD, MONIQUE

1730 NE 10TH LANE

CAPE CORAL, FL 33909

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

Northwest Registered Agent, LLC.

3030 N. Rocky Point Dr. STE 150A

P.O. Box NOT acceptable

Tampa FL 33607

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]
Signature of an officer or director

Monique Ward, 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.

Tom Glover
Signature of Registered Agent

3/22/18

Date

If signing on behalf of an entity:

Tom Glover

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 (03/12)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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