## P1500044800

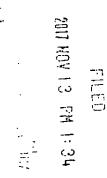
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



200305526222

11/14/17--01032--012 \*\*35.00



○ GOLDEN NOV 1 5 2017

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: ORLANDO MARKETING AGENCY, INC.				
Name of Corporation				
DOCUMENT NUMBER: P15000044800				
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:				
Samantha Jackson				
Name of Contact Person				
Meriam Corporate Services, Inc.				
Firm/Company				
PO Box 52588				
Address				
Mesa AZ 85208				
City/State and Zip Code				
meriamfinancial@gmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Samantha Jackson at (720 ) 318.8456  Name of Contact Person Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.				
Mailing Address: Street Address: Amendment Section Amendment Section				
Amendment Section Amendment Section  Division of Corporations Division of Corporations				
P.O. Box 6327 Clifton Building				

2661 Executive Center Circle

Tallahassee, FL 32301

CR2E045 (03/12)

Tallahassee, FL 32314

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

statement of cha	nge is submitted for a corporation or	.0502, 607.1508, or 617.1508, Florida rganized under the laws of the State of gistered agent, or both. in the State of	Florida
1. The name of t 2. The principal	he corporation: ORLANDO MA office address: 400 NORTH W	RKETING AGENCY, INC. YMORE RD WINTER PARK	K FL 32789
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 05/19/201	5 Document number: P150	00044800
	street address of the current register tment of State: (If resigned, enter res	ed agent and registered office on file vigned)	vith the
	ALEXANDER COONEY		_
	3203 LAWTON RD STE 1	26	_
	ORLANDO, FL 32803	·	- ' 63
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or registered o	2017 NOV
	ALEXANDER COONEY		
	400 NORTH WYMORE R	D	R O
	P.O. Box WINTER PARK FL 32789	NOT acceptable	$\frac{1}{2}$ $\frac{\pi}{2}$ $\omega$
The street addre		reet address of the business office of i	its registered agent.
Such change wa authorized by th	s authorized by resolution duly adole board, or the corporation has been	pted by its board of directors or by an a notified in writing of the change.	officer so
1/1 (520)	ney	ALEXANDER COONEY,	
I hereby accept I further agree t	e of an officer or director  the appointment as registered agent o comply with the provisions of all s my duties, and I am familiar with a s document is being filed merely to that the corporation has been notific	Printed or typed name and to t and agree to act in this capacity. statutes relative to the proper and con nd accept the obligation of my positio reflect a change in the registered offi- ed in writing of this change.	mplete on as registered
11 000	W ~	10/29/2017	
Sign	native of Registered Agent	Date	
If signing on bel	nalf of an entity:		
Ту	ped or Printed Name		

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