Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000365702 3)))



H220003657023ABC

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

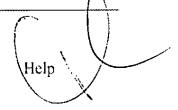
	To:					
		Division of Co	rporations			
		Fax Number	: (850)617-6380	-	2022	
	From:			<del>-</del> .	22 (	
		Account Name	: REGISTERED AGENT SOLUTIONS INC		0CT	
_	:	Account Number	: I20100000062	<u>.</u> .	~	
٧)	1	Phone	: (888)705-7274		.5	
<u>:</u>	-	Fax Number	: (888)706-7274		<b>&gt;&gt;</b>	
<u> </u>					Æ	
<u>a_</u>	**Enter	the email addres	s for this business entity to be used for fu	iturė,	ထ္	
25	annual report mailings. Enter only one email address please.**					
1 OCT	Ema	ail Address:				
~	-					

## REGISTERED AGENT CHANGE V MEDIA SERVICES, INC.

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

Electronic Filing Menu

Corporate Filing Menu



## **COVER LETTER**

TO:

Amendment Section Division of Corporations

1512<del>9</del>570210

gent and fe the followi	e are submitted for ing:	filing.	2022 OCT 25 1
gent and fe		filing.	25
		filing.	25
the followi	ing:		25
			25
		₹.}	
·			$\geq$
		111	8: 2
		::- ::3-	2
			_
·	)		
. ( 888	705-7274		
Area Co	ode & Daytime Tel	ephone Number	_
ıt of State.			
nendment ( vision of C e Centre o   5 N. Mor	Section Corporations of Tallahassee	810	
	at (888 Area Control State.  eet Addre mendment vision of (ee Centre control	Area Code & Daytime Telent of State.  eet Address: nendment Section vision of Corporations e Centre of Tallahassee	at (888) 705-7274  Area Code & Daytime Telephone Number of State.  eet Address: nendment Section vision of Corporations

. . .

CR2E045 (04/13)

## pg 3 of 3 H22000365702 3

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

•	provisions of sections 607,0502, 61 nge is submitted for a corporation					ï	
·	to change its registered office or i						
I. The name of the	he corporation: V MEDIA SER	RVICES,	INC.				
2. The principal of	office address: 1000 5TH STF	REET S	ΓΕ 200 M	IIAMI BEA	CH, FL 3310	39	
3 T1 11	11						
•	ddress (if different):	8	Dagumant	P18	3000008565	20	
						20/2 OCT	
	street address of the current registe iment of State: (If resigned, enter re		and register	ed office on fil	e with the	CT 2	
	TEDDER, MELYNDA	4			<u>.</u>	25	_
	458 SOUTH 3RD ST	<del>-</del> -		1		AH S	1 11 0
	MACCLENNY		FL	32063		8: 21	70
6. The name and (if changed):	street address of the new registered Registered Agent Solu		•	nd /or registered	d office		
	155 Office Plaza Dr.		Suite A		<del></del>		
		P.O. Box NOT	•				
	Tallahassee	FL	3230	<u>.                                    </u>			
The street addre	ss of its registered office and the s be identical.	street addr	ess of the b	usiness office	of its registered	agent,	
Such change wa authorized by th	s authorized by resolution duly ac e board, or the corporation has be	lopted by i	ts board of I in writing	directors or by of the change.	y an officer so		
isi Melynda		Ме	lynda Te		Authorize	d Perso	on
I hereby accept I further agree to of my duties, and document is bein	the appointment as registered age to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change been notified in writing of this ch	ll statutes i se obligation in the regionize.	ree to act in relative to to on of my pos	he proper and sition as regist ce address, I h	complete perfoi tered agent. Or	r if this	
	usture of Registered Agent			Date			
If signing on bel	nalf of an entity:						
Mackenzie Hart,	Assistant Secretary						
Ту	ped or Printed Name						
	* * * FILIN	G FEE: \$	35.00 * * *				