P20000053636

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

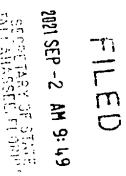




100372467651

RAERO Chanse

09/02/21--01019--015 **35.00



SEP 1 5 2021 A RAMSEY

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI Name	ECT: JV MEDIA VENTURES INC. of Corporation
DOCU	JMENT NUMBER: P20000053636
The en	nclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
LOVE	TTE DOBSON
Name	of Contact Person
INCFE	LE.COM
Firm/C	Company
17350	STATE HWY 249 #220
Addre	SS
HOUS	TON, TEXAS 77064
City/S	tate and Zip Code
	EFILE1234@INCFILE.COM
E-mai	l address: (to be used for future annual report notification)
For fu	rther information concerning this matter, please call:
LOVE	TTE DOBSON at (888) 462-3453 Name of Contact Person Area Code & Daytime Telephone Number
	Name of Contact Person Area Code & Daytime Telephone Number

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	provisions of sections 607.0502. Onge is submitted for a corporation to change its registered office of	n organized	under the laws of the	State of FLORIDA		
1. The name of	he corporation: JV MEDIA VENT	TURES INC				
2. The principal	office address: 900 Biscayne Blyd	#5301 .Miai	mi, F1. 33132			
3. The mailing a	ddress (if different): 900 Biscayno	Blvd #530	Miami, FL 33132			
4. Date of incorp	poration/qualification: 07/13/2020		Document number: <u>P20000053636</u>			
5. The name and	street address of the current regi- tment of State: (If resigned, enter	stered agent				
LEGALING CORPORATE SERVICES INC.						
5237 SUMMERLIN COMMONS SUITE 400						
FORT MYERS, FL 33907						
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office JASON VE 1000 Picture Plant #5201					
	JASON VE			2 7		
	900 Biscayne Blvd #5301					
	900 Biscayne Blvd #5301 P.O. Box NOT acceptable Miami, Florida, 33132					
The street address changed will	ess of its registered office and the be identical.	e street add	ress of the business	office of its registered agent.		
Such change wa authorized by th	ns authorized by resolution duly ne board, or the corporation has	adopted by been notifie	its board of directored in writing of the c	s or by an officer so hange.		
Dasa	$\sim 1/\nu$	J	JASON VEJPRESIDENT			
•	re of an officer of director			d name and title		
- I further agrée : - of my duties, an - document is bei	the appointment as registered a to comply with the provisions of all am familiar with and accept ing filed merely to reflect a chan s been notified in writing of this	all statutes the obligat ge in the re	gree to act in this cap relative to the propo ion of my position as gistered office addre	oacity, er and complete performance eregistered agent. Or, if this ess. I hereby confirm that the		
Stock	ull	0	8/23/2021			
Significant on be	nature of Registered Agent	_	1)	ate		
tr signing on oc	half of an entity:					
i r	yped or Printed Name	_				

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

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