P97000096156

	equestor's Name)			
(RE	equestors (varne)			
(Ad	ldress)	_		
(Ad	ldress)			
(Cri	ty/State/Zip/Phone	#)		
PICK-UP	WAIT	MAIL		
(D.	ninga Patita Naga			
ud)	isiness Entity Nami	e)		
· - · · · · · · · · · · · · · · · · · · ·				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Eiling Officer			
Opecial instituctions to	rining Officer.	İ		
11	mile			
Umils				





COVER LETTER

TO:

Amendment Section Division of Corporations

Image Media & Marketing Inc.				
SUBJECT: Image Media & Marketing, Inc. Name of Corporation				
DOCUMENT NUMBER: P97000096156	······································			
The enclosed Statement of Change of Registered Office	ce/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter	er to the following:			
James Sopchak				
Name of Contact Person				
Image Media & Marketing, Inc.				
Firm/Company				
49 River Road				
Address				
Clinton, CT 06413				
City/State and Zip Code				
jsopchak@imagemediamrkt.com				
E-mail address: (to be used for future annual report notification)				
•	·			
For further information concerning this matter, please	call:			
James Sopchak	at ((904) 233-9061 Area Code & Daytime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Depa	rtment of State.			
Mailing Address: Amendment Section	Street Address: Amendment Section			

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

CR2E045 (04/13)

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida State rganized under the laws of the State of Florida State of State of Florida State of Florida State of State of Florida State of Flori	rida
		egistered agent, or both, in the State of Flori keting Inc	ida.
	he corporation: Image Media & Mari		
2. The principal	office address: 49 River Road, Clinto	m, C1 00413	
3. The mailing a	ddress (if different): 7901 4th St N S	TE 300, St. Petersburg, FL 33702	
4. Date of incorp	poration/qualification: 11/10/1997	Document number: P9700009615	56
	l street address of the current register tment of State: (If resigned, enter res	red agent and registered office on file with t signed)	he
	Sopchak, James S		
	412 NE 10th Avenue		
	Pompano Beach, FL 33060		700
6. The name and (if changed):	street address of the new registered	agent (if changed) and /or registered office	
	Registered Agents Inc		
	7901 4th St N STE 300		: . •
	St. Petersburg, FL 33702	O. Box NOT acceptable	.၁ င ာ
The street address changed will	ess of its registered office and the st	treet address of the business office of its re	gistered agent
Such change was authorized by it	as authorized by resolution duly add the board, or the corporation has been	opted by its board of directors or by an offi in notified in writing of the change.	icer so
\mathcal{L})	James S. Sopchak, Director	
	re of an officer or director	Printed or typed name and title	
I hereby accept I further agree of my duties, an document is bel corporation has	the appointment as registered ager to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change s been notified in writing of this cha	nt and agree to act in this capacity. statutes relative to the proper and comple cobligation of my position as registered ag in the registered office address, I hereby c inge.	ete performanc zent. Or, if thi onfirm that the
David Kaserts		11/05/2024	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
David Robe	rts		
T	yped or Printed Name		

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