

S04230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

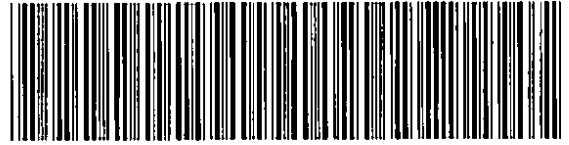
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SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MEDIA STAGE, INC.
Name of Corporation

DOCUMENT NUMBER: S04230

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:

NICKY N. SMITH
Name of Contact Person
MEDIA STAGE, INC.
Firm/Company
350 INTERNATIONAL PARKWAY
Address
SUNRISE, FL 33325
City/State and Zip Code

NSMITH@MEDIASTAGE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICKY N. SMITH at (954) 838-8000
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

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

2023 MAY 22 AM 7:47
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

**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: Media Stage, Inc.
2. The principal office address: 350 International Parkway
Sunrise, FL 33325
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/02/1990 Document number: S04230
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)
Christopher P. Kelley, PA
11098 Biscayne Boulevard, Suite 205
Miami, Florida 33161
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Nicky N. Smith
350 Internantional Parkway
Sunrise, FL 33325 P.O. Box NOT acceptable

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 authorized by the board, or the corporation has been notified in writing of the change.

Wilson Alers

Signature of an officer or director

Wilson Alers, President

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.

Nicky Smith

Signature of Registered Agent

5/15/2023

Date

If signing on behalf of an entity:

Nicky N. Smith

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 (04/13)