I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: CHRISTOPHER SCALI

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P94000010914

Entity Name: S2 ADVERTISING, INC.

Current Principal Place of Business:

533 N. NOVA RD. 213B ORMOND BEACH, FL 32174

Current Mailing Address:

PO BOX 4264 ORMOND BEACH, FL 32175 US

FEI Number: 59-3227335

Name and Address of Current Registered Agent:

SCALI, CHRISTOPHER 533 N. NOVA RD. 213B ORMOND BEACH, FL 32174 US FILED Feb 02, 2015 Secretary of State CC1949416288

Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

 Electronic Signature of Registered Agent
 Date

 Officer/Director Detail :
 Title

 Title
 P

Title	P	Title	VP
Name	SCALI, CHRISTOPHER	Name	SCALI, TONI L
Address	533 N. NOVA RD., #213B	Address	533 N. NOVA RD., #213B
City-State-Zip:	ORMOND BEACH FL 32174	City-State-Zip:	ORMOND BEACH FL 32174

02/02/2015