**Entity Name:** RBID.COM, INC.  

**Current Principal Place of Business:**  
2901 WEST COAST HIGHWAY  
SUITE #140  
NEWPORT BEACH, CA 92663

**Current Mailing Address:**  
2901 WEST COAST HIGHWAY  
SUITE #140  
NEWPORT BEACH, CA 92663 US

**FEI Number:** 33-0857311  

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**  
ZUROMSKI, PAUL  
220 CHANTILLY TERRACE  
OVIEDO, FL 32765 US

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:

<table>
<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Address</th>
<th>City-State-Zip</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRESIDENT</td>
<td>JONES, KENYATTO M</td>
<td>2901 WEST COAST HIGHWAY</td>
<td>NEWPORT BEACH CA 92663</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SUITE #140</td>
<td></td>
</tr>
<tr>
<td>SECRETARY</td>
<td>JONES, KENYATTO M</td>
<td>2901 WEST COAST HIGHWAY</td>
<td>NEWPORT BEACH CA 92663</td>
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<td></td>
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<tr>
<td>TREASURER</td>
<td>JONES, KENYATTO M</td>
<td>2901 WEST COAST HIGHWAY</td>
<td>NEWPORT BEACH CA 92663</td>
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<tr>
<td></td>
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<td>SUITE #140</td>
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</tr>
<tr>
<td>DIRECTOR</td>
<td>JONES, KENYATTO M</td>
<td>2901 WEST COAST HIGHWAY</td>
<td>NEWPORT BEACH CA 92663</td>
</tr>
<tr>
<td></td>
<td></td>
<td>SUITE #140</td>
<td></td>
</tr>
</tbody>
</table>

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.

**SIGNATURE:** KENYATTO JONES  
**Title:** PRESIDENT  
**Date:** 05/04/2018

**Electronic Signature of Signing Officer/Director Detail**  
**Date**