## FDANDOD 4739

(Re	equestor's Name)	
(Ad	ddress)	
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(Ci	ity/State/Zip/Phone	e #)
PICK-UP	MAIT WAIT	MAIL
(Bi	usiness Entity Nar	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		]

Office Use Only



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06/27/13--01023--007 \*\*35.00

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Jan Jan



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: June 25, 2013

Order#: 694113-005

Re: DATA CELL SYSTEMS, INC.

Enclosed please find:

XX \_\_ Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Vera M. Norris c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	mge is submitted for a corporate	$P_{\rm c}$ , 617.0502, 607.1508, or 617.1508, Florida Station organized under the laws of the State of Textor or registered agent, or both, in the State of Flor	as	
1. The name of t	the corporation: DATA CELL SY	YSTEMS, INC.		
	office address: 250 Hwy. 3201,			
3. The mailing a	uddress (if different):			
4. Date of incorp	poration/qualification: 09/30/20	Document number: F020000049	939	
	d street address of the current represent of State: (If resigned, enter	gistered agent and registered office on file with t er resigned)	the	
	National Corporate Research,	, Ltd.		
	155 Office Plaza Drive			
	Tallahassee, FL 32301			<b>-</b>
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office			
	Corporation Service Company	<u>/</u>	N 27	PAR.
	1201 Hays Street		2	RY OF
PO Box NOT acceptable Tallahassee, FL 32301		O Box NOT acceptable	AH III	STA ORAI
	ess of its registered office and the identical.	he street address of the business office of its re	gistered age	enic enic
Such change was authorized by the	as authorized by resolution duly ne board, or the corporation has	y adopted by its board of directors or by an office been notified in writing of the change.	cer so	
A Signatur	re of an officer or director	Alberto de Cardena 5	Secreta	ary
I hereby accept I further agree to performance of agent. Or, if thi hereby confirm Corporatio	the appointment as registered to comply with the provisions o my duties, and I am familiar w is document is being filed mere	agent and agree to act in this capacity.  If all statutes relative to the proper and comple,  with and accept the obligation of my position as  ely to reflect a change in the registered office accepted in writing of this change.  05/10/2013	registered	
By: Sign	nature of Registered Agent	Date		_
If signing on be	half of an entity:			
Sarah Wright, A		<del></del>		
T	vped or Printed Name			

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