F02000004995

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: DeMorgan Industries Corporation

Name of Corporation

DOCUMENT NUMBER: F02000004995

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:

Jim Saghir

Name of Contact Person

DeMorgan Industries Corporation

Firm/Company

120 Faun Rd

Address

ST. AUGUSTINE, FL 32086

City/State and Zip Code

jas@demorgan.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jim Saghir

_{at} 904

501-7429

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

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 Delaware
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: DEMORGAN INDUSTRIES CORPORATION
2. The principal office address: 120 FAUN RD
ST. AUGUSTINE, FL 32086
3. The mailing address (if different): P.O. BOX 2236
ST. AUGUSTINE, FL 32085-2236
4. Date of incorporation/qualification: 8/7/1995 Document number: F02000004995
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).
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
JIM SAGHIR
120 FAUN RD
P.O. Box NOT acceptable ST. AUGUSTINE, FL 32086
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 so authorized by the board, or the corporation has been notified in writing of the change.
Jim A Saghir, President Signature of an officer or director 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.
Din Saylin 10/15/2013
Signature of Registered Agent Date If signing on behalf of an antity:
If signing on behalf of an entity:
Jim Saghir Typed or Printed Name

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