## F0500000 7362

(R	equestor's Name)	
, (A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-ÚP	☐ WAIT	MAIL
, · (B	usiness Entity Nar	me)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
	,	

Office Use Only



100136790471

OB OCT 31 PM 1: 18 OCT 31 AM 10: 46

ON OF STREET OF STREET OF STATE OF STREET OF STREET OF STATE OF S

R.A. Charge

**C.COULLIETTE** 

OCT 3 1 2008

**EXAMINER** 



CORPORATION SERVICE COMPANY ACCOUNT NO. : 07210000032

REFERENCE: 75,8922

7501715

AUTHORIZATION :

COST LIMIT : \$ 35.00

\_\_\_\_\_\_

ORDER DATE: October 15, 2008

ORDER TIME : 9:16 AM

ORDER NO. : 758922-007

CUSTOMER NO: 7501715

-----

## CHANGE OF AGENT

NAME: DIGIMARC CORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Doreen Wallace

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute inge is submitted for a corporation organized under the laws of the State of $\underline{Delay}$ or to change its registered office or registered agent, or both, in the State of Florida	ware
1. The name of t	the corporation: DIGIMARE CORPORATION / 1_/ Secure (	Prodential
2. The principal	office address:, Gemini Drive, Beaverton, OR 97008	
<u> </u>	address (if different):	
4. Date of incorp	poration/qualification: 12/20/2006 Document number: F05000007	7362
	d street address of the current registered agent and registered office on file with the rtment of State:	ur.
	C T Corporation System	2 Z
	1200 South Pine Island Road	8
	Plantation, FL 33324	F GO
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	OB OCT 31 PM 1:1
	Corporation Service Company	<b>a</b>
	1201 Hays Street	
	(P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	
The street addre	ess of its registered office and the street address of the business office of its registered.	stered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an office he board, or the corporation has been notified in writing of the change.	er so
William	Vince D'Angelo, Sr. V.P.  (Printed or typed name and title)	
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete ad I am familiar with and accept the obligation of my position as registered ageing filed merely to reflect a change in the registered office address, I hereby considered in writing of this change.	performance nt. Or, if this Ifirm that the
By: /W.	tion Service Company  Live Company  Market Solution  (Date)	18
	chalf of an entity:	
	Vannoy, Asst. V.P.	
(7)	Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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