## F06000003746

(Requestor's Name)		
,		
(Address)		
· .		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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SECRETARY OF STATE
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## **COVER LETTER**

	Amendment Section Division of Corporations		
SUBJE	CT: DIGITAL 1 RADIO (Name of Corporation)		
DOCUI	MENT NUMBER: <u>F06000003746</u>		
The enc	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:			
	(Name of Contact Person)  DibitAL 1 RADIO  (Firm/Company)		
	(Address)  H317 6/1 S A. Harpson Ave  (Address)  Clearworter Fr 33756  (City/State and Zip Code)		
For further information concerning this matter, please call:			
	(Name of Contact Person) at (727) 4464786  (Area Code & Daytime Telephone Number)		
Enclosed is a \$35.00 check made payable to the Department of State.			

Street Address: Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Mailing Address: Amendment Section

P.O. Box 6327

**Division of Corporations** 

Tallahassee, FL 32314

CR2E045 (8/05)

TO:

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

Pursuant to the provisions of sections 607.0502, 617.050 statement of change is submitted for a corporation organization in order to change its registered office or regist	nized under the laws of the State of <u>Del Owo</u> re
1. The name of the corporation: $U/U$	HOU I ROOMO, Inc.
1. The name of the corporation:  2. The principal office address:  # 317 (llawa)	611 J. 17. Hallison Me.
	1er, PL 33136
3. The mailing address (if different):	
4. Date of incorporation/qualification: 5/26/6	Document number: <u>F0600000374</u>
5. The name and street address of the current registered a	agent and registered office on file with the
Florida Department of State:	Duncan
rues	E. Divid #B FEE TI
3/0	E. Divid #B
Uear	water, 12 33756 85 8
6. The name and street address of the new registered age (if changed):	7.
- ROBDINS	EQUITAS, P.A.
2639 (BO Box NOT constable	DI MLK JI SH. NOM
St. Peters!	bux, Ft 33704
The street address of its registered office and the stree as changed will be identical.	
Such change was authorized by resolution duly adopte authorized by the board, of the corporation has been n	
(Signature of an affice for director)	Hung Marques Lecrely
I hereby accept the appointment as registered agent at I further agree to comply with the provisions of all states of my duties, and I am familiar with and accept the obdocument is being filed merely to reflect a change in the corporation has been notified in writing of this change.	tutes relative to the proper and complete performance ligation of my position as registered agent. Or, if this he registered office address. I hereby confirm that the
(Signature of Registered Agent)	7/20/07 (Date)
If signing on hehalf of an entity:	
J. Christopher Robbin	s, President
Robbins Equitas P. A	EE: \$35.00 * * *

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314