Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number : 120000000195

Phone

: (850)521-1000

Fax Number

: (850)558-1575

REGISTERED AGENT CHANGE

DIGITAL RECEIVER TECHNOLOGY, INC.

Certificate of Status √	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

Aurstant 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 Maryland
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: DIGITAL RECEIVER TECHNOLOGY, INC.
2. The principal office address: 20250 CENTURY BLVD., STE. 300
GERMANTOWN MD 20874
3. The mailing address (if different):
4. Date of incorporation/qualification; 6-12-2007 Document number: F07000003035
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
CYNTHIA SOLOMON
35245 MULHOLLAND DR PS
FRUITLAND PARK FL 34731
CYNTHIA SOLOMON 35245 MULHOLLAND DR FRUITLAND PARK FL 34731 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): Corporation Service Company 1201 Hays Street
Corporation Service Company
1201 Hays Street
(P.Q. Box NOT acceptable)
Tallahassee, FL 32301
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.
Religion W. Sackell REBERGE LY BUKKET ASET SEEY
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 accument 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.
Corporation Service Company By: Signature of Registered Agent) (Date)
If signing on behalf of an entity: Heather Chapman as its agent (Types of Printed Name)
* * * FILING FEE: \$35.00 * * *

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