## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : NRAI CORPORATE SERVICES, INC. - IRVINE

Account Number: I20080000054 : (949)955-9585

: (800)562-6504 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:

## REGISTERED AGENT CHANGE **DELBERT SERVICES CORPORATION**

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

Electronic Filing Menu

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Help

TO:850 617 6381

## **COVER LETTER**

Amendment Section Division of Corporations TO:

SUBJECT:	UBJECT: DELBERT SERVICES CORPORATION				
	Na	me of Corporation	<del></del>		
DOCUMENT NU	MBER:	F0800001749			
The enclosed States	ment of Change of Registere	ed Office/Agent and fee are sub	nitted for filing.		
Please return all cor	rrespondence concerning thi	is matter to the following:			
		Sophy Keo ne of Contact Person			
·	Nam	ne of Contact Person			
		orporate Services, Inc.			
		rum/company			
	2875 Mi	chelle Drive, Suite 100			
		Address			
		vine, CA 92606 /State and Zip Code			
•	·	•			
-	E-mail address: (to be us	ed for future annual report no	tification)		
For further informa	ation concerning this matter,	please call:			
	Sophy Keo	at ( 800 )	562-6439 ytime Telephone Number		
Nar	ne of Contact Person	Area Code & Da	ytime Telephone Number		
Enclosed is a \$35.0	00 check made payable to the	e 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

## 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, statement of change is submitted for a corporation organized under the laws of the State of Nevada			
in order to change its registered office or registered agent, or both, in the State of Florida.			
1. The name of the corporation: DELBERT SERVICES CORPORATIO	<u>N</u>		
2. The principal office address: 1600 S. Douglass Road, Anaheim, CA 92806			
· 6-			
3. The mailing address (if different):		<u>=</u>	
4. Date of incorporation/qualification: 1/24/2008 Document number: F98000	001	74	$\overline{q}$
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)	選一 三葉 三二	PM	,EO
CT Corporation System	(D)	-:- -:-	
1200 S Pine Island Rd	D.F.	ΰi	
Plantation, FL 33324			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  NRAI Services, Inc.			
515 East Park Avenue			
P.O. Box NOT acceptable			
Tallahassee, FL 32301			
The street address of its registered office and the street address of the business office of its registe as changed will be identical.		nt,	
Such change was authorized by resolution duly adopted by its board of directors or by an officer s authorized by the board, or the corporation has been notified in writing of the change.	ю		
Micole Chouinard, Asst. Secretz Signature of an officer or director  Nicole Chouinard, Asst. Secretz	ıry	_	
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 pe of my duties, and I am familiar with and accept the obligation of my position as registered agent document is being filed merely to reflect a change in the registered office address. I hereby confir corporation has been notified in writing of this change.	rforma Or, if t m that t	nce his he	
7/18/2011			
Signature of Registered Agent Date		_	
If signing on behalf of an entity: NRAI Services, Inc.			
Jose Castellanos, Assistant Secretary  Typed or Printed Name			
* * * FILING FEE: \$35.00 * * *			