

104000054824

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(Address)

(City/State/Zip/Phone #)

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104-54824  
JR



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 17, 2006

DREW OLIVER  
6404 YELLOW CREEK CT.  
ELLENTON, FL 34222

SUBJECT: DIGITAL DECISIONS, LLC  
Ref. Number: L04000054824

We have received your document for DIGITAL DECISIONS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 206A00003143

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Digital Decisions, LLC.

(Name of Corporation)

**DOCUMENT NUMBER:** L04000054824

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:

Drew R. Oliver

(Name of Contact Person)

Digital Decisions, LLC.

(Firm/Company)

6404 Yellow Creek Ct.

(Address)

Ellenton, FL 34222

(City/State and Zip Code)

For further information concerning this matter, please call:

Drew Oliver

(Name of Contact Person)

at ( 941 )

721-6022

(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

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TALLAHASSEE, FLORIDA

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the limited liability company is: Digital Decisions LLC
2. The mailing address of the limited liability company is: 6404 Yellow Creek Ct  
Ellenton FL 34222

3. Date of filing/registration in Florida 7/19/2004
4. Document number LO4000054824

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Drew Oliver  
Name  
9604 71<sup>st</sup> Ave E  
Address  
Palmetto FL 34221  
City, State and Zip

6. The name and address of the new registered agent and/or office:

Drew Oliver  
Name  
6404 Yellow Creek Ct  
Florida street address (P.O. Box NOT acceptable)  
Ellenton FL 34222  
City, State and Zip

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
(Signature of a member or authorized representative of a member)

Drew Oliver  
(Printed or typed name of signee)

*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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature]  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00