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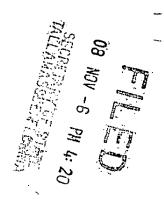
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S. HAWKES NOV 7 2008 EXAMINER

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.

Name of the limited liability company: Digidox, LLC			+	
2.	(a) Principal office address of limited liability company: 7803 Southland Blvd (Note: MUST BE STREET ADDRESS) Suite 203		Suite 203	## 13
			Orlando, FL 32809	æ
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	7803 Southland Blvd Suite 203 Orlando, FL 32809	₽ #
01	10213	2006	L05000115487	
		- · · · · · · · · · · · · · · · · · · ·	4. Document number	
5.	(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		T)	
		Registered Agent:	Hutchins, Robert J.	Emiliaria empirarian
		Registered Office Address:	1515 International Pkwy Suite 2001	
			Lake Mary, FL 32746	The state of the s
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	1987年 2017年	• * *
		NEW Registered Agent:	Wright, Brannon	0
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	7803 Southland Blvd Suite 203	Đ
			<u>Orlando</u> ,FL_32809	
tha off her lial lim	t affice reby pilit	imited liability company is not organized under the later the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the car confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of thability company.	t address of the registered office and the busing ase of a Florida limited liability company, it is	ess
		on Wright or typed name of signee)	-	
I k cor am F.S cor	iere nply Jan S. C	by accept the appointment as registered agent and a wwith the provisions of all statutes relative to the pro niliar with and accept the obligations of my position or, if this document is being filed to merely reflect a c pring the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, a as registered agent as provided for in Chapter hange in the registered office address, I hereb I in writing of this change.	end I • 608, sy
		ire of Registered Agent)		

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