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D. BRUCE

JAN 11 2012

**EXAMINER** 

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TO: Registration Section Division of Corporations	
SUBJECT: Digital Signature Name of Limited	Nergy LLC Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office (	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this m	atter to the following:
Miguel A. Suasez Name of Person	
Firm/Company	
281 Island Drive	12 JAN 34 CRET
Key Biscayne, FL 331 City/State and Zip Code	49
m Suarez @ digital Sig E-mail address: (to be used for future annual report notification	
For further information concerning this matter, plea	
Miguel Svare2 at (	786 <u>277-7358</u> Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amo	unt:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

## 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. Name of the limited liability company: Digita	al Signergy LLC
2. (a) Principal office address of limited liability compar	ny:
(Note: MUST BE STREET ADDRESS)	281 Island Drive Key Biscayne, FL 3314
(b) Mailing address of limited liability company:	· · · · · · · · · · · · · · · · · · ·
(Note: MAY BE POST OFFICE BOX)	281 Island Drive Key Biscayne, FL 331
06/17/2009	L09000058768
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	Jose C Romano 5
Registered Office Address:	646D SU 73 Sheet TI Miami, FL 33/4/3
(b) Enter name of NEW Registered Agent and/or NE	EW Registered Office address 😭 😯 🔘
NEW Registered Agent:	Miguel A. Svare 25
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	281 Island Drive Rey Biscayne ,FL 33149
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be identiability company, it is hereby confirmed that the change (of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization
Printed or typed name of signee	<u> </u>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with and accept the obligations of my pand I am familiar with a compand the limited limity compand the com	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.

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

Signature of Registered Agent