L12000037192

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COVER LETTER

TO: Registration Section Division of Corporations	
· — ·	M SERVICES LLC ted Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
MARIANA G NOBO Name of Person	
Name of reison	
DIGICOM SERVICES LLC	
. Firm/Company	•
801 NW 45TH ST	
Address	
POMPANO BEACH, FL 33064	
City/State and Zip Code	
MARINOBO@GMAIL.COM E-mail address: (to be used for future annual report notific	ation)
E-man address. (to be used for future annual report notific	anon)
For further information concerning this matter, p	lease call:
MARIANA G NOBO at	(561) 374-4988
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following an	mount:
\$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:	DIGICOM SERVICES LLC		
2. (a) Principal office address of limited liability compa	ny: 801 NW 45TH ST		
(Note: MUST BE STREET ADDRESS)			
,	POMPANO BEACH, FL 33064		
(b) Mailing address of limited liability company:	801 NW 45TH ST		
(Note: MAY BE POST OFFICE BOX)	POMPANO BEACH, FL 33064 13		
	SET ED		
MARCH 16, 2012	L12000037192 0		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:		
Registered Agent:	MARIANA G NOBO		
Registered Office Address:	7905 EAST DRIVE APARTMENT 7 B		
	NORTH BAY VILLAGE, FL 33141		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW Registered Agent</u> :	EW Registered Office address: MARIANA G NOBO		
NEW Registered Office Address:	801 NW 45TH STREET		
(MUST BE FLORIDA STREET ADDRESS)			
	POMPANO BEACH ,FL33064		
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 of amember or authorized representative of a member			
MARIANA G. NOBO 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 Chapter 608, F.S. Or, if this document is being filed to haddress, I hereby confirm that the limited liability company.	l agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in nerely reflect a change in the registered office my 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

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