

LIZAM 7634

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000273310 3)))



H180002733103ABEZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH LLP
Account Number : 120100006075
Phone : (305) 373-9419
Fax Number : (305) 373-9443

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

Email Address: gisela.fasco@nelsonmullins.com

LLC REGISTERED AGENT CHANGE
DIGI SOUTH, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

RECEIVED
SEP 20 2018

Electronic Filing Menu

Corporate Filing Menu

Help

9/21/18 DS

850-617-6381

9/20/2018 11:42:33 AM PAGE 1/001

Fax Server



September 20, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DIGI SOUTH, LLC
1250 EAST HALLANDALE BEACH BLVD.
406
HALLANDALE BEACH, FL 33009US

SUBJECT: DIGI SOUTH, LLC
REF: L12000147834

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please complete registered agent's address.

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) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H18000273310
Letter Number: 018A00019626

2018 SEP 20 PM 4:18

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: <u>DIGI SOUTH, LLC</u>	
2. (a) <u>c/o Jon A. Sale, Receiver</u>	(b) <u>c/o Jon A. Sale, Receiver</u>
Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u>)	Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u>)
<u>Nelson Mullins Broad and Cassel</u>	<u>Nelson Mullins Broad and Cassel</u>
<u>2 South Biscayne Blvd., 21st Floor</u>	<u>2 South Biscayne Blvd., 21st Floor</u>
<u>Miami, FL 33131</u>	<u>Miami, FL 33131</u>
<u>11/26/2012</u>	<u>L12000147834</u>
3. Date of filing/registration in Florida	4. Document number
5. (a) <u>Darice Lang</u>	
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
<u>1250 East Hallandale Beach Blvd.</u>	
Registered Office Address <u>(MUST BE FLORIDA STREET ADDRESS)</u>	
<u>409</u>	
<u>Hallandale Beach, FL</u> , FL <u>33009</u>	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :	
<u>Jon A. Sale, Receiver</u>	
<u>NEW Registered Office Address:</u>	
<u>Nelson Mullins Broad and Cassel</u>	
<u>2 South Biscayne Blvd., 21st Floor</u>	
<u>Miami</u> , FL <u>33131</u>	

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.

Jon A. Sale
Signature of a member or authorized representative of a member

Jon A. Sale, Receiver
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 605, 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.

Jon A. Sale
Signature of Registered Agent

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