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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

Kimberly V. 2949

REGISTERED AGENT CHANGE

SWI DIGITAL.COM INCORPORATED

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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T. Roberts APR 18 2008

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SWI Digital.com Incorporated
2. The principal office address: _____
50 Queen Street North, Suite 1020, P.O. Box 2248, Kitchener, Ontario N2H 6M2
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 12/31/2001 Document number: P01000122067
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

McDermott, Anthony J

100 West Cypress Creek Road, Suite 1050

FT. Lauderdale, FL 33309

6. The name and street address of the now registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Geosign Group Holdings (US) Inc.

by: Timothy G. Nye - Secretary
(Printed or typed name and title)

(Signature of an officer or director)

Shareholder

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company

By: (Signature of Registered Agent)

4-10-08
(Date)

If signing on behalf of an entity:

Ann R. Shilling, Assistant VP
(Type or Print Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2B045 (8/05)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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