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Requester's Name

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	UMBER(S), (if known):
1(Corporation Name)	(Document #)
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NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other
	Examiner's Initials

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

		of sections 607.0502, a organized under the la			
		nent in order to change			
the State of Flo			==	s approve or registrers	in agoni, or boni, in
1. The name of	f the corporati	ion: Dxm /	MOBILE,	INC	
2. The mailing	address of the	e corporation : 473	3 OlIVE	BRANCH Rd	Apt 713
	·	ORLA	NDO FL	32811	
3. Date of inco	orporation/qua	alification: 01/08/63	<u> </u>	ocument number:	P0200000233 8
4. The name an	nd address of	the current registered ag	gent and office	: :	₽i
	Ε	VERETT, DUST	~~~		AEC 8
	4	VERETT, DUST	RANCH RO	1 AOT 713	ALL SELECTION OF THE SE
	OR.	LANDO EL .	32811		RY N
5. The name an	d address of t	he new registered agen	t (if changed)	and/or registered o	ffice (if changed):
	_	(P. O. Box No.	- '		
•		IAN M. OPUST			Su o
•	1010	3 EAST COLON	MAL DRI	VE SVITE !	00
	ORLA	ANDO, FL 3	2817		
The street addreagent, as chang	ess of its regi ed, will be id	stered office and the st entical.	treet address o	of the business offi	ce of its registered
Such change was authorized by the	as authorized he board.	by resolution duly add	opted by its bo	oard of directors or	by an officer so
Mila	: M	All III		.a -	
(Signature	of an officer, cha	irman or vice chairman of the	board)		<u>-05-02,</u> ate)
ADRIBA	, m. C	PUSTIC PR	ESIDEN S	_	
					one atata d
corporation, I h	iereby accept to comply wit	the appointment as re	epi service oj gistered agen statutes relat	t and agree to act	in this capacity.
performance of registered agen	my duties, ar t.	tered agent and to acc the appointment as re th the provisions of all ad I am familiar with a	nd accept the	obligation of my p	osition as
<i></i>	Mila !	M.M.J	// -	07-09	5-02
(S	ignature of Regis	tered Agent	<i>T</i>	(Date)	, 02
If signing on behal	•	2	 · .		
<i>[H &</i>	RIAN (N. OPUSTIL Name)	<u> </u>	(Capacity)	<u> </u>
``	••	, , , , -		(Juhuni)	

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