

POS 000126954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

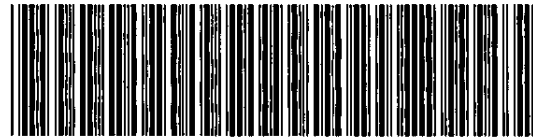
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/12/14--01005--014 **35.00

FILED
14 JUN -6 PM 3:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 06 2014

C. CARROTHERS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 22, 2014

DEREN GIORDANO
2098 NE 3 WAY
BOCA RATON, FL 33431

SUBJECT: GOING DIGITAL, INC.
Ref. Number: P05000126954

We have received your document for GOING DIGITAL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Cathy A Carrothers
Regulatory Specialist

Letter Number: 814A00011194

COVER LETTER

RECEIVED

14 JUN -6 PM 2:15

TO: Amendment Section
Division of Corporations

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

NAME OF CORPORATION: Going Digital Inc

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deren Giordano
Name of Contact Person
Going Digital Inc
Firm/ Company
2098NE 3 Way
Address
Boca FL 33431
City/ State and Zip Code
amber@goingdigitalinc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amber Fried at (954) 297-4861
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|--|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Going Digital Inc
2. The principal office address: 2098 NE 3 Way Boca Raton FL 33431
3. The mailing address (if different): _____
4. Date of incorporation/qualification: _____ Document number: _____
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

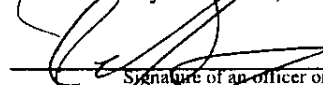
Deren Giordano
315 NW 10 Street
Delray Bch FL 33444

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

Deren Giordano
2098 NE 3 Way
P.O. Box NOT acceptable
Boca Raton FL 33431

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.



Signature of an officer or director

Deren Giordano

Printed or typed name and title

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.



Signature of Registered Agent

4-15-11

Date

If signing on behalf of an entity:

Typed or Printed 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
CR2E045 (03/12)