PD5000130503

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ENSEGNETARY OF STATE

RARD (1/8)



February 1, 2013

Division of Corporations Florida Department of State P.O. Box 6327 Tallahassee, FL 32314

RE: Direct Hit Systems, Inc.

Dear Sir or Madam:

Enclosed please the Statement of Change of Registered Office and Agent for Corporation application for the above mentioned. Also enclosed is the required \$35 filing fee.

Please file with your office and return evidence to my attention at the letterhead address. If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Norine Nagel

Client Specialist

nnagel@nrai.com

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

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, nange is submitted for a corporation organized under the laws of the State of Florida ler to change its registered office or registered agent, or both, in the State of Florida.	this
	the corporation: Direct Hit Systems, Inc.	
2. The principa Melbourne, l	al office address: 1698 West Hibiscus Boulevard, Suite A	
3. The mailing	address (if different):	
4. Date of incor	rporation/qualification: 10/6/2005 Document number: P05000137503	
	d street address of the current registered agent and registered office on file with the artment of State: (If resigned, enter resigned)	
	Kelly S. Solid	
	1676 Seabury Point Road NW	13 4
	Palm Bay FL 32907	13 FEB 13
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	FEB 13 AM DO 1
	NRAI Services, Inc.	
	515 East Park Avenue,	
	P.O. Box NOT acceptable Tallahassee, Florida 32301	
as changed will	ess of its registered office and the street address of the business office of its registere be identical. as authorized by resolution duly adopted by its board of directors or by an officer so board, or the corporation has been notified in writing of the change.	d agent,
Signatui	Dennis J. Reinhold, Secretar	У
I hereby accept I further agree to performance of agent. Or if this hereby confirm t	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registe is document is being filed merely to reflect a change in the registered office address, that the corporation has been notified in writing of this change.	ered I
88y: ///	Services, Inc. 2/4/20/3 pature of Registered Agent Date	
,	half of an entity:	
Norine Nagel-Ass	·	
	ped 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)

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