

PO600020385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

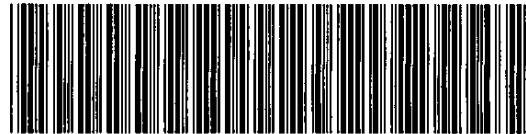
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

David Campbell
GAVE
AUTHORIZATION BY PHONE TO
CORRECT RA
DATE
DOC. EXAM



800077584878

08/07/06--01010--002 **35.00

FILED
06 AUG - 7 AM 9:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

As sfisfoe
rt/a2

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DMC Solutions Inc.
(Name of Corporation)

DOCUMENT NUMBER: P06000020385

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID CAMPBELL
(Name of Contact Person)

DMC Solutions Inc.
(Firm/Company)

4209 Goldie St.
(Address)

Jacksonville FL 32207
(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID CAMPBELL at (904) 716 0368
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

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: DMC Solutions Inc.
2. The principal office address: 1209 Norwich Rd.
Jacksonville FL 32207
3. The mailing address (if different): 4209 Goldie St
Jacksonville FL 32207
4. Date of incorporation/qualification: 2/10/06 Document number: PO600020385
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Business Filings Incorporated
1203 Governors Square Blvd Suite
Tallahassee FL 32301

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

DAVID Campbell
DMC Solutions Inc.
4209 Goldie St
(P.O. Box NOT acceptable)
Jacksonville FL 32207

FILED
06 AUG - 7 AM 9:40
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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]
(Signature of an officer or director)

DAVID CAMPBELL, President
(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]
(Signature of Registered Agent)

July 20th 2006
(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 (8/05)