12000023321

(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



600164398326

Charge

02/01/10--01037--002 **35.00

2010 FEB -1 PM 3: 47
SECRETARY OF STATE

DR 12/10

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	Memory Bridging Name of C	Incorporated orporation	<u>.</u>
DOCUMENT NUMBER:	P070	000023321	
		e/Agent and fee are submitte	ed for filing.
Please return all correspond	ence concerning this matter	to the following:	
	Steven		
	Name of Cor	ntact Person	
	Memory Bridgir Firm/Co	ng Incorporated	.
		1 - 2	
	3600 Pres	erve Lane	
	Add		
			•
<u></u>	Destin, Flo	rida 32550	
	City/State at	ia Zip Code	
- T- 11	baronepro@		
E-mail	address: (to be used for f	uture annual report notific	cation)
For further information con	cerning this matter, please of	call:	
	Barone	at (<u>850</u>) Area Code & Daytim	420-5895
Name of Co	ntact Person	Area Code & Daytim	e Telephone Number
Enclosed is a \$35.00 check	made payable to the Depart	ment of State.	
<u>Ma</u> An	illing Address: nendment Section	Street Address: Amendment Sec	tion
Di	vision of Corporations	Division of Cor	porations
	D. Box 6327 Hahassee, FL 32314	Clifton Building 2661 Executive	

Tallahassee, FL 32301

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

statement of char	orovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of Florida to change its registered office or registered agent, or both, in the State of Florida.
	the corporation: Memory Bridging Incorporated
2. The principal	office address: 3600 Preserve Lane, Destin, Florida 32550
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 02/21/2007 Document number: P07000023321
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Steven Barone 75 1
	Steven Barone 141 Mack Bayou Loop, Suite 201 Septe Base Baseh, Florida, 32459
	Santa Rosa Beach, Florida 32439
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	3600 Preserve Lane
	P.O. Box NOT acceptable
	Destin, Florida 32550
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
Sygnatur	Steven Barone, President & CEO Printed or typed name and title
I hereby accept I further agree to of my duties, an document is bei corporation has	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 performance d I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the before an actified in writing of this change.
	lu Dun // 20/2010 nature of Registered Agent / Date
•	half of an entity:
	Steven Barone yped or Printed Name
•	y pow or trained trained

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