P07000054013

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Document Number)		
Certified Copies	Certificates	of Status
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Special Instructions to I	Filing Officer:	
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COVER LETTER

Division o	of Corporations			
SUBJECT: <u>Mo</u>	bemac, Inc (Name	of Corporation)	<u> </u>	
DOCUMENT NU	JMBER: <u>P07000054013</u>			
The enclosed State	ement of Change of Registered C	office/Agent and	d fee are submitted for filing.	
Please return all co	orrespondence concerning this m	atter to the foll	owing:	
Michael Becker (Name of Contact Person)				
	(Name of		,	
Mobemac, Inc				
(Firm/Company)				
780 N State Rd 7 (Address)				
	(ridaress)		
_	Plantation	FL te and Zip Cod	33317	
		-	e)	
For further inform	ation concerning this matter, ple	ase call:		
	Michael Becker	at (954) 581-2171 ea Code & Daytime Telephone Number)	
(N	ame of Contact Person)	(Are	ea Code & Daytime Telephone Number)	
Enclosed is a \$35.	00 check made payable to the De	epartment of St	ate.	
	Mailing Address: Amendment Section	j	Street Address: Amendment Section	
	Division of Corporation		Division of Corporations	
	P.O. Box 6327		Clifton Building	
	Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

TO:

Amendment Section ·

$\mbox{\tt ṢTATE}\mbox{\tt MENT}$ 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 statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both, in the State of in order to change its registered office or registered agent, or both in the State of in order to change its registered office or registered agent, or both in the State of in order to change its registered office or registered agent.	Florida
1. The name of the corporation: Mobemac, Inc	
2. The principal office address: 780 N State Rd 7 Plantation, FL 33317	
3. The mailing address (if different): same	
4. Date of incorporation/qualification: 05/03/2007 Document number: P0700	00054013
5. The name and street address of the current registered agent and registered office on file w Florida Department of State: (If resigned, enter resigned)	vith the
Michael Becker	
501 S State Rd 7	O;
Plantation, FL 33317	J 9 API CREI LAHI
6. The name and street address of the new registered agent (if changed) and /or registered of (if changed):	FILE APR 29 ARETARY OF AHASSEE F
Joshua Becker	AN IO: F STAT FLORI
19370 Collins Ave PH25C	57 IDA
(P.O. Box NOT acceptable)	
Sunny Isles, FL 33160 The street address of its registered office and the street address of the business office of as changed will be identical.	its registered agent,
Such change was authorized by resolution duly adopted by its board of directors or by a authorized by the board, or the porporation has been notified in writing of the change.	n officer so
(Signature or an officer of director) Michael Becker (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 confined for any duties, and I am familiar with and accept the obligation of my position as register document is being filed therely to reflect a change in the registered office address, I her corporation has been notified in writing of this change.	omplete performance red agent. Or, if this eby confirm that the
4/24/09	
(Signature of Registered Agent) (Date)	
If signing on behalf dean entity:	
(Typed or Printed Name)	

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