## P08000041925

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(Otty/Otato/Zip/) Hone #/			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



300243425753

01/15/13--01006--020 \*\*35.00



UAN 16 2013 C. MUSTAIN

## **COVER LETTER**

TO:	Amendment Section Division of Corporations				
SUBJ	Nordic Backup, Inc.  ECT: Name of Corporation				
DOC	P08000041925 UMENT NUMBER:				
The e	sclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please	return all correspondence concerning this matter to the following:				
	Morten Westerberg				
	Name of Contact Person				
	Nordic Backup, Inc.				
	Firm/Company				
	600 Rinehart Rd. Suite 3050				
	Address				
	Lake Mary, FL 32746				
	City/State and Zip Code				
	mw@nordic-backup.us				
	E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:					
Morte	at ( )				
	Name of Contact Person at ()  Area Code & Daytime Telephone Number				
Enclosed is a \$35.00 check made payable to the Department of State.					
	Mailing Address:  Amendment Section  Street Address:  Amendment Section				
	Division of Corporations  Division of Corporations				
	P.O. Box 6327 Clifton Building				
	Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301				

CR2E045 (03/12)

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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.			
	he corporation: Nordic Backup, Inc				
2. The principal	office address: 600 Rinehart Rd. Si	uite 3050 Lake Mary, FL 32746			
3. The mailing a	ddress (if different): N/A				
4. Date of incorp	poration/qualification: 4/25/2008	Document number: P08000041925			
	street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)			
	CT CORPORATION SYSTEM				
	1200 SOUTH PINE ISLAND ROA	.D			
	PLANTATION, FL 33324 US	resigned)  JAN 15 PH			
6. The name and (if changed):	street address of the new registere	ed agent (if changed) and /or registered office			
	Morten Westerberg				
	600 Rinehart Rd Suite 3050				
	P.O. E Lake Mary, FL 32746	Box NOT acceptable			
		street address of the business office of its registered agent,			
	_	dopted by its board of directors or by an officer so een notified in writing of the change.			
ill	lhh	Morten Westerberg CEO			
I hereby accept I further agree t performance of agent. Or, if thi	o comply with the provisions of a	gent and agree to act in this capacity. all statutes relative to the proper and complete and accept the obligation of my position as registered to reflect a change in the registered office address, I			
By: U	this	9 January 2013			
_	nature of Registered Agent	Date			
Nordic Backup, I	half of an entity:				
	ped or Printed Name				

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

FI 006 - 10/25/2012 Walters Kluwer Online