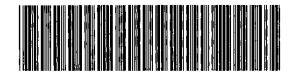
## PD8DD0105508

(Requestor's Name)						
DVT 413 Walnut St # 5327 Green Cove Springs, FL 32043						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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SECRETARY OF STATE OF

RAROCHS

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

statement of chang	ovisions of sections 607.0502, 61 ge is submitted for a corporation ( to change its registered office or 1	organized u	nder the laws of the	State of Florida	<u> </u>	
1. The name of the	e corporation: Digital Video	rechnolo (	gies, Inc	<u></u>		
2. The principal of	ffice address: 413 Walnut St	#5327	Green Cove S	Springs, FL	32043	
3. The mailing add	dress (if different):					
4. Date of incorpo	ration/qualification: 12/03/20	08	Document number:	P08000105	5568	
	treet address of the current register ment of State: (If resigned, enter re-		nd registered office	on file with the		
<u>_</u>	Inited States Corporation	n Agents	, Inc			
1	13302 Winding Oaks Blvd Suite A-100					
<u> </u>	Tampa, FL 33612 US				3 1	
6. The name and s (if changed):	treet address of the new registered	d agent (if c	hanged) and /or regi	stered office	13 JAN 22 AND 22	
<u>F</u>	Paul Boykin				<b>4</b> 2	
4						
(	P.O. Box NOT acceptable  Green Cove Springs, FL 32043					
_	of its registered office and the se identical.	·	s of the business of	Tice of its regist	tered agent,	
Such change was authorized by the	authorized by resolution duly ad- board, or the corporation has bee	opted by its on notified i	board of directors in writing of the cha	or by an officer ange.	so	
Haul	Soft Description	Pat		sident		
I hereby accept th I further agree to performance of m agent. Or, if this	e appointment as registered ages comply with the provisions of all y duties, and I am familiar with a document is being filed merely to at the corporation has been notif	l statutes re and accept a reflect a c	lative to the proper the obligation of my hange in the registe	ncity. and complete prosition as res	zistered ess, I	
Vaul &	softin	.1/1	7/13			
-6	arc of Registered Agent		Date			
If signing on beha	n or an entity.					
Турс	d or Printed Name					

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