P09000084067

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R-A. Chorse C.COULLIETTE

AUG 19 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: LOUDBEACON CORP. Name of Corporation
DOCUMENT NUMBER: P09 000084067
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:
Joel C. Relova
Name of Contact Person
LOUDBEACON CORP.
Firm/Company
12160 Backwind Dr.
Address
Jacksonville, PL 32258 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: Toel Relova Name of Contact Person at (904) 474-4283 Area Code & Daytime Telephone Number
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 FLO LIO 9
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: LOUDBEACON CORPORATION
2. The principal office address: 12160 Backwind Drive
Jacksonville, PL 32258
3. The mailing address (if different):
4. Date of incorporation/qualification: Oct-12, 2009 Document number: P09 0000 8 406 7
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
- CORPORATion Service Company
-12.01 Hays ST
Tallassee F/ 3230.1 = 500
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Romualdo C. Marguirez Ir
4620 Recos of P.O. BOX NOT acceptable
Jacksmville, FC 32259
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.
Joel C. Relova - President Printed or typed pame 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.
Kombo C. Mayor 08/07/10
Signature of Registered Agent Date If signing on behalf of an entity:
Typed or Printed Name

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