## 15000066756

(Re	questor's Name)			
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(Ad	dress)			
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(Ad	dress)			
(City/State/Zip/Phone #)				
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PICK-UP	WAIT	MAIL MAIL		
/Ru	siness Entity Nan	ne)		
(50	Siliess Littly Ivan	ne)		
(Do	cument Number)			
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Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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## **COVER LETTER**

Division of	Corporations	
SUBJECT: DIGS	, Incorporated	
	(Name of C	orporation)
DOCUMENT NUM	IBER: P95000066756	
		e/Agent and fee are submitted for filing.
	respondence concerning this matter	•
i icase icium an con	espondence concerning and matter	to the following.
٨	leil B. Kaplan	
_	(Name of Co	ntact Person)
	(Firm/Co	ompany)
<u>24</u>	0 Summer St. (Add	reco)
	(1.444	1000)
Ro	ockland, MA 02370	
	(City/State ar	nd Zip Code)
For further informati	on concerning this matter, please of	call:
Neil Kaplan		. 794 249 0600
	ne of Contact Person)	at (781) 249-0600 (Area Code & Daytime Telephone Number)
·	·	
Enclosed is a \$35.00	check made payable to the Depart	ment 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

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

statement of cha	provisions of sections 607.0502, 617.0502 nge is submitted for a corporation organi r to change its registered office or register	zed under the laws of the State of Fl	orida
1. The name of	he corporation: DIGS, Incorporated		
2. The principal	office address: 4521 PGA Blvd #340, Pal	m Beach Gardens, FL 33418	
3. The mailing a	ddress (if different): 240 Summer St., Ro	ockland, MA 02370	
4. Date of incorp	poration/qualification: August 29, 1995	Document number: P9500006	6756
	street address of the current registered ag tment of State:	ent and registered office on file with	the
	Neil B. Kaplan		- N
	4521 PGA Blvd #340		08 MAR 24 08 MAR 24 SECRETAR ALL AHASS
	Palm Beach Gardens, FL 33418		AR 24 P AR ARY NHASSE
6. The name and (if changed):	street address of the new registered agent	(if changed) and /or registered office	PH 2
	InCorp Services, Inc.		TAIL ORIN
	17888 67th Court North		
	(P.O. Box NOT acceptable)		
	Loxahatchee, FL 33470		
The street address changed will	ss of its registered office and the street a be identical.	ddress of the business office of its r	egistered agent,
Such change was authorized by the	s authorized by resolution duly adopted board, or the corporation has been not	by its board of directors or by an of ified in writing of the change.	fficer so
(Signatu	ul 3 hum re of an officer of director)	Neil B. Kaplan PRESI	PEUT
I further agree to of my duties, an document is bei	the appointment as registered agent and o comply with the provisions of all statu d I am familiar with and accept the oblig ng filed merely to reflect a change in the been notified in writing of this change.	l agree to act in this capacity. tes relative to the proper and compl cation of my position as registered of registered office address, I hereby	lete performance igent. Or, if this confirm that the
D. All	on a behalfor	3/17/08	
Sheors.	refure of Registered Agent)  Scholes, the half of an entity:	(Date)	
Sarah	Bibson on behalf of		
ncorp 3	ervices In & * * FILING FEI	E: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)