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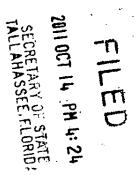
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10/14/11--01019--006 **35.00



10/17/11

COVER LETTER

TO: Amendmen Division of	nt Section Corporations			
SUBJECT:	D.B.D. MANAG Name of	EMENT, INC. Corporation		
DOCUMENT NU	MBER: P98	3000031376		
The enclosed States	ment of Change of Registered Off	ice/Agent and fee are submitted f	or filing.	
Please return all con	rrespondence concerning this matt	er to the following:		
			,	
	April	I. Halle		
•	Name of C	ontact Person		
The Halle Law Firm, P.A.				
	Firm/C	Company		
	0404 Nouth Fodous	J. Harbarette, Costa ACA		
3101 North Federal Highway, Suite 401 Address				
	210	C35	•	
	Eart Laudarda	la Elarida 23306		
Fort Lauderdale, Florida 33306 City/State and Zip Code				
·				
		elawfirm.com	on)	
E-mail address: (to be used for future annual report notification)				
		•		
For further information	tion concerning this matter, please	call:		
	April I. Halle	at (954)	537-0466	
Nan	ne of Contact Person	at (<u>954</u>) Area Code & Daytime T	elephone Number	
Enclosed is a \$35.00 check made payable to the Department of State.				
	Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section Division of Corpor		
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Ce Tallahassee, FL 32		

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flori ange is submitted for a corporation organized under the laws of the State	
in orde	er to change its registered office or registered agent, or both, in the State	of Florida.
	the corporation: D.B.D. Management, Inc.	
2. The principal	office address: 3425 North Federal Highway, Fort Lauderdale	, Florida 33306
3. The mailing a	address (if different):	
4. Date of incor	poration/qualification: April 3, 1998 Document number:	P98000031376
	d street address of the current registered agent and registered office on file rtment of State: (If resigned, enter resigned)	with the
	Rick Rodriguez	
	497 N.W. 31st Avenue	TAISE 7
	Pompano Beach, Florida 33069	CREW
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered	ZIII OCT 14 PH 4: 24 SECRETARY OF STATE TALLAHASSEE, FLORID TALLAHASSEE
	Joel Marcus	_ FLOS
	676 West Prospect Road P.O. Box NOT acceptable	- 器
,	P.O. Box NOT acceptable Fort Lauderdale, Florida 33309	
The street address as changed will	ess of its registered office and the street address of the business office of be identical.	of its registered agent,
Such change wa authorized by the	as authorized by resolution duly adopted by its board of directors or by he board, or the comporation has been notified in writing of the change.	an officer so
k Or Signatur	Laird Bol	es ad title
I hereby accept I further agree to of my duties, an document is bei corpgration has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and id I am familiar with and accept the obligation of my position as regist ing filed merely to reflect a change in the registered office address, I have been notified in switing of this change.	complete performance ered agent. Or, if this
Lane	Bohn V 10/6/11	<u>/</u>
	half of an entity:	
Т	Joel Marcus yped or Printed Name	

* * * FILING FEE: \$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)