# I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

#### SIGNATURE: PATRICIA A. MILLER

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# S55273

Entity Name: MEMPHRE LIMITED, INC.

### Current Principal Place of Business:

C/O LAW OFFICE OF JEFF NOVATT, P.A. 1415 PANTHER LANE SUITE 327 NAPLES, FL 34109

#### **Current Mailing Address:**

C/O LAW OFFICE OF JEFF NOVATT, P.A. 1415 PANTHER LANE SUITE 327 NAPLES, FL 34109 US

### FEI Number: 65-0271153

## Name and Address of Current Registered Agent:

NOVATT, JEFF ESQ. 1415 PANTHER LANE SUITE 327 NAPLES, FL 34109 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	E JEFF NOVATT, ESQ.			01/05/2015
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PD	Title	TSD	
Name	MILLER, PATRICIA A	Name	LAMBERSON, JANE E	
Address	70 ROSEHILL AVENUE	Address	8955 FONTANA DEL SOL WAY	
City-State-Zip:	#507 TORONTO ONTARIO M4T 2W7	City-State-Zip:	NAPLES FL 34108	
Title	VD			
Name	MILLER, STEPHANIE			
Address	568 HIGHLAND AVENUE			
City-State-Zip:	MONTCLAIR NJ 07043			

PRESIDENT

01/05/2015

FILED Jan 05, 2015 Secretary of State CC1866078455

Certificate of Status Desired: No

Date