

PD30000 15802

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

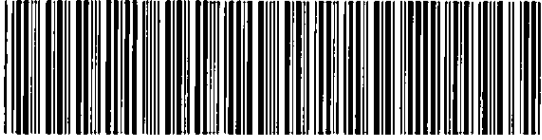
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400340764774

02/27/20--01015--021 \*\*35.00

RECEIVED  
FEB 27 2020  
DIVISION OF REEL RECORDS

CM  
3/13/20

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Digital Brainchild Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P03000015802

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:

Christopher M. Perry  
Name of Contact Person

Digital Brainchild Inc.  
Firm/Company

240 Spring Water Lane  
Address

Knoxville, TN 37934  
City/State and Zip Code

E-mail address: chris@digitalbrainchild.com  
(to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher Perry at \*(813) 629-9500\*  
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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

- 1. The name of the corporation: Digital Brainchild Inc.
- 2. The principal office address: 240 Spring Water Lane  
Knoxville, TN 37934
- 3. The mailing address (if different): same as above
- 4. Date of incorporation/qualification: 2/04/2003 Document number: P03000015802
- 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)

christopher M. Perry  
5502 Golden Isles Dr.  
Apollo Beach, FL 33572

- 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Kristin Assis  
6721 NW 26<sup>th</sup> Ave.  
P.O. Box NOT acceptable  
Fort Lauderdale, FL 33309

FILED  
 CLERK OF STATE  
 DIVISION OF CORPORATIONS  
 2020 FEB 27 PM 3:32

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.

Christopher M. Perry  
Signature of an officer or director

christopher M. Perry,  
Printed or typed name and title  
 Principal

*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.*

Kristin Assis  
Signature of Registered Agent

2/23/2020  
Date

If signing on behalf of an entity:

Kristin Assis  
Typed or Printed Name

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