

M/4000000343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

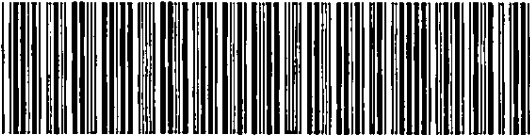
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/19/17--01019--002 **30.00

17 SEP 22 AM 8:49
REGISTERED MAIL
RECEIVED

SEP 19 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2017

GPSI MEDIA, LLC
1074 N ORANGE AVE
SARASOTA, FL 34236

SUBJECT: GPSI MEDIA, LLC
Ref. Number: M1400000343

We have received your document for GPSI MEDIA, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 317A00016923

RECEIVED
2017 SEP 25 PM 1:59
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: GPSI Media, LLC

Enter new principal office address, if applicable: 1074 N Orange Ave
Sarasota, Florida 34236
*(Principal office address
MUST BE A STREET ADDRESS)*

Enter new mailing address, if applicable: _____
*(Mailing address
MAY BE A POST OFFICE BOX)*

2. The Florida document number of this limited liability company is: M14000000343

3. Jurisdiction of its organization: Florida

4. Date authorized to do business in Florida: 01/17/2014

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: GPSI TELEMATICS, LLC
(must contain "Limited Liability Company," "L.L.C." or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____

City Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

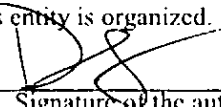
8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
------------------------	-------------	----------------	-----------------------

_____	_____	_____	<input type="checkbox"/> Add
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 MISSOURI STATE OFFICE

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



 Signature of the authorized representative

David Saslow

Typed or printed name of signee

Filing Fee: \$25.00

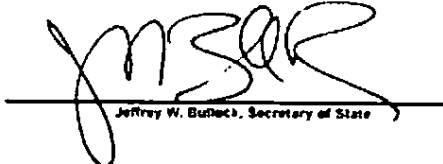
Delaware

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "GPSI MEDIA, LLC", CHANGING ITS NAME FROM "GPSI MEDIA, LLC" TO "GPSI TELEMATICS LLC", FILED IN THIS OFFICE ON THE TENTH DAY OF APRIL, A.D. 2017, AT 12:30 O'CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

5466782 8100
SR# 20176182797

Authentication: 203235184
Date: 09-15-17

You may verify this certificate online at corp.delaware.gov/authver.shtml

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company: GPSI Media, LLC
2. The Certificate of Formation of the limited liability company is hereby amended as follows:

The name of the limited liability company is GPSi Telematics LLC.

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 4th day of April, A.D. 2017.

By: 
Authorized Person(s)

Name: David Saslow, EVP
Print or Type