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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

OWNER

SIGNATURE: JAMES B. MALLESS

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L00000014612

Entity Name: WIRELESS PLANNING SERVICES, L.L.C.

Current Principal Place of Business:

321 NORTH KENTUCKY AVE. SUITE 10 LAKELAND, FL 33801

Current Mailing Address:

845 MISSISSIPPI AVENUE LAKELAND, NC 33801 US

FEI Number: 59-3685023

Name and Address of Current Registered Agent:

MALLESS, JAMES B 845 MISSISSIPPI AVENUE LAKELAND, FL 33801 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:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGRM
Name	SEGGERMAN, KAREN E
Address	845 MISSISSIPPI AVENUE
City-State-Zip:	LAKELAND FL 33801
	Name Address

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 26, 2021 Secretary of State 2657720412CC

Date

Certificate of Status Desired: No

01/26/2021 Date