F08000005105

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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02/22/16--01005--004 **25.00

03/30/16--01005--016 **10.00

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MAR 3 0 2016 I ALBRITTON

COVER LETTER

Divi	sion of Corporations	
SUBJECT:	WIRELESS COMMUNICATIONS, IN	IC.
SODJECT.	Name of Co.	rporation
DOCUMEN	F08000005125 T NUMBER:	
The enclosed	d Statement of Change of Registered Office	Agent and fee are submitted for filing.
Please return	all correspondence concerning this matter	to the following:
	NICOLAS SIHA	
	Name of Cont	act Person
	LEGALINC CORPORATE SE	RVICES INC.
	Firm/Con	npany
	17350 STATE HIGHWAY 249	
	Addre	ess
	HOUSTON, TX 77064	
	City/State and	Zip Code
	SUPPORT@LEGALINC.COM	
	E-mail address: (to be used for fur	ture annual report notification)
For further in	nformation concerning this matter, please ca	ıll:
NICOLAS	SIHA	713 478.1040 at (
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a	a \$35.00 check made payable to the Departm	nent of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
	1 dimidosec, 1 L 32317	Tallahassee, FL 32301



February 26, 2016

NICOLAS SIHA LEGALINC CORPORATE SERVICES INC. 17350 STATE HIGHWAY 249 HOUSTON, TX 77064

SUBJECT: WIRELESS COMMUNICATIONS, INC.

Ref. Number: F08000005125

We have received your document for WIRELESS COMMUNICATIONS, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The fee to file your document is \$35.

There is a balance due of \$10.00.

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) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 116A00004045

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 cha	nge is submitted for a corporation organized under the laws of the State of FLORIDA
in orde	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of to 2. The principal CHARLOT	4800 BEAGAN DRIVE
2 77 '11'	4800 REAGAN DRIVE
	ddress (if different):
4. Date of incorp	poration/qualification: 12/01/2008 Document number: F08000005125
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	USA-RA LLC
	841 PRUDENTIAL DRIVE, 12TH FLOOR
	JACKSONVILLE, FL 32207
6. The name and (if changed):	841 PRUDENTIAL DRIVE, 12TH FLOOR JACKSONVILLE, FL 32207 street address of the new registered agent (if changed) and /or registered office LEGALINC CORPORATE SERVICES INC.
	LEGALINC CORPORATE SERVICES INC.
	5237 SUMMERLIN COMMONS, SUITE 400
	P.O. Box NOT acceptable FORT MYERS, FL 33907
The street address changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
Mic	NICOLAS SIHA Printed or typed name and title
I hereby accept I further agree to performance of agent. Or, if the hereby confirm	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change. All Old Date
If signing on be	half of an entity:
T	rped or Printed Name

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