

F09000002808

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

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change*

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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12 JUL -2 AM 10:56

*DR
7/2/12*



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 247739 7888798

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 5.00

ORDER DATE : 07-02-12

ORDER TIME : 10:22 AM

ORDER NO. : 247739-008

CUSTOMER NO: 7888798

CHANGE OF AGENT

NAME: CELLULAR SPECIALTIES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS: _____

**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 New Hampshire in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CELLULAR SPECIALTIES, INC.
2. The principal office address: 670 North Commercial St, Suite 202
Manchester, NH 03101
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/13/2009 Document number: F09000002808

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

Corporation Service Company

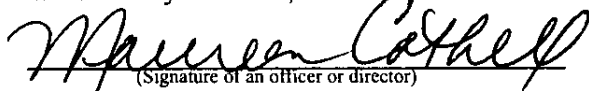
1201 Hays Street

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

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.


(Signature of an officer or director)

Maurcen Cathell, Vice President

(Printed or typed name and title)

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.

Corporation Service Company

By: 
(Signature of Registered Agent)

June 20, 2012

(Date)

If signing on behalf of an entity:

Sylvia Queppet, Assistant Vice President

(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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