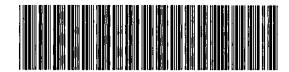
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SECRETARY OF STATE DIVISION OF CORPORATIONS





## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 16, 2006

ALEXANDER RODRIGUEZ 1612 13TH STREET ST. CLOUD, FL 34769

SUBJECT: METRO MOBILE, LLC Ref. Number: L06000056028

We have received your document for METRO MOBILE, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6984.

Deborah Bruce Document Specialist

Letter Number: 806A00040874

SECRETARY OF STATE CONVISION OF COMPORATIONS

2006 JUL - 5 PM 12: 43



TO: Registration Section Division of Corporations	
SUBJECT: METRO MOBILE L.  (Name of Limited I.)	
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	ter to the following:
ALEXANDER RODRIGUEZ (Name of Person)	
METRO MOBILE LLC (Firm/Company)	<del></del>
1612 13 th Street	
(Address)	
Saint Cloud, FL 34769	
(City/State and Zip Code)	<b>201</b>
For further information concerning this matter, please	e call:
Afexander Rodriguez at (7)	(Area Code & Daytime Telephone Telephone
(Name of Person)	(Area Code & Daytime Telephone tomber)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amou	nt:
<b>☑</b> \$25 Filing Fee	\$55 Filing Fee & Certified Copy

## STATEMENT OF CHANGE OF REASTERED OFFICE OR REGISTERED AGENT OR ROTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: METRO MOBILE LLC  2. The mailing address of the limited liability company is: 1612 13th Street  Saint Cloud, FL 34769  O1 JUNE 2006  3. Date of filing/registration in Florida  4. Document number  5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:  Oniversal Resources, LLC  Name  6849 West Colonial Drive  Address  Oclando, FL 32818  City, State and Zip  6. The name and address of the new registered agent and/or office:  Alexander Rodriguez  Name  1612 13th Street  Florida street address (P.O. Box NOT acceptable)  Soint Cloud FL 34769
Down 2006  On June 2006  3. Date of filing/registration in Florida  4. Document number  5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:  Oniversal Resources, MC  Name  6849 West Colonial Drive  Address  Orlando, FL 32818  City, State and Zip  6. The name and address of the new registered agent and/or office:  Alexander Rodriguez  Name  1612 13th Street  Florida street address (P.O. Box NOT acceptable)  Soint Cloud FL 34769
201 JUNE 2006  3. Date of filing/registration in Florida  4. Document number  5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:    Oniversal Resources, UC
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6. The name and address of the new registered agent and/or office:  Alexander Rodriguez  Name  1612 13th Street  Florida street address (P.O. Box NOT acceptable)  Saint Cloud FL 34769
Alexander Rodriguez  Name  1612 13th Street  Florida street address (P.O. Box NOT acceptable)  Saint Cloud FL 34769  January 1500 1500 1500 1500 1500 1500 1500 150
Name  1612 13th Street  Florida street address (P.O. Box NOT acceptable)  Soint Cloud FL 34769  James VISIGNER DEL STREET  Soint Cloud FL 34769
City, State and Zip  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered of and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization
or the operating agreement of the limited liability company.
(Signature of a member or authorized representative of a member)
MEXAMDER RODRIGUEZ (Printed or typed name of signee)
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 608, F.S. Or is the locument is being filled 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.
(Signature of Registoter Agent)  Division of Corporations P.O. Boy 6327 Tallahassee, FL 32314

**FILING FEE: \$25.00**