Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number

2 (850)617-6390

From:

Account Name

: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone

: (561)694-8107

Fax Number

: (561)694-1639

REGISTERED AGENT CHANGE

SHARED SITES ACQUISITION, LLC

Cetti Cetti

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Corporate Filing Menu

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH 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. Name of the limited liability company: Shared Sites Acquisition, LLC	
2. (a) Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny:
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
11/09/2007	L07000113626
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	C T CORPORATION SYSTEM
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 US
(b) Enter name of NEW Registered Agent and/or NE	W Registered Office address:
NEW Registered Agent:	Corporate Creations Network Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Palm Beach Gardens ,FL 33410
If the limited liability company is not organized under the that after the change or changes are made, the Florida stretoffice of the registered agent will be identical. Or, in the charges confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles climited liability company. Signature of a member or authorized representative of a member)	laws of the State of Florida, it is hereby confirmed
•	·
Angela E. Howard On behalf of "Thomas P. Hunt, Senior VP" (Printed or typed name of signoe)	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provisions of all statutes relative to the provision familiar with and accept the obligations of my position is. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified (Signature of Registered Agent)	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00