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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2013

RACHEL GELB 2372 HANOVER DRIVE DUNEDIN, FL 34698

SUBJECT: SIM CITY CELLULAR LLC

Ref. Number: L12000018488

We have received your document for SIM CITY CELLULAR LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

A post office box is not an acceptable address for the registered agent.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

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) 245-6051.

Tammi Cline Regulatory Specialist II

Letter Number: 313A00023718

COVER LETTER

TO: Registration Section of Corp.			
SUBJECT: SIM	CITY CELLULA	Z LLC	
	Name of Limit	Z LLC led Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	dence concerning this matter	to the following:	
	<u> </u>	Name of Person	·
	SIM C	TTY CEUULAR Firm/Company	
	<i>2</i> 372	HANOVER DRIVE	
	DUNEDIA), FL 34698 City/State and Zip Code	
	<u>wireless</u> - e E-mail address: (to	xchange oan.com	on)
For further information con	ncerning this matter, please ca	ail:	
RACHAEL (GECB Person	at (<u>727)</u> <u>641-946</u> Area Code & Daytime Te	dephone Number
Enclosed is a check for the	following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STM CTTY CELLULAR LLC

(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L 12000018488</u> .	were filed on MARCH 22, 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:
WIRELESS EXCHANGE LLC	
The new name must be distinguishable and end with the words 'Lim'L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	2372 HANOVER DRIVE
(Principal office address MUST BE A STREET ADDRESS)	DUNEDIN, FL 34698
Enter new mailing address, if applicable:	PO BOX 1240 3 1
(Mailing address MAY BE A POST OFFICE BOX)	PALM HARBOR, FL 34682
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address: 2	372 HANOVER DRIVE Enter Florida street address
Dun	OEDIN , Florida 34698 Ciņ' Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>

If Changing Registered Agent, Signature of New Registered Agent

I hereby accept the appointment as registered agent and agree to act in this capacity. Ifurther 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, if this document is being filed 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.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	LUZ RIVERA	2372 HANOVER Dr.	Add
		DUNEDIN, FL 34698	Remove
			Add
		(70 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1	- Add
		et la company de	Remove
			Add Remove
			Add Remove
			Add
			Remove

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)			
ed October 15th, 2013.			
Rachael Hell- Signature of a member or authorized representative of a member			
Signature of a member or authorized representative of a member			
BACHAEL GELB Typed or printed name of signer			
Typed or printed name of signee			

Page 3 of 3

Filing Fee: \$25.00

2015 OCT /7 EM 4: 21