Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : CS SUNBIZ, LLC

Account Number : I20040000164

Phone : (407)691-5600

Fax Number : (407)691-5620

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LLC REGISTERED AGENT CHANGE MOBILOT, LLC

Certificate of Status	0
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MAY 1 7 2013 A. LUNT

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. Na	une of the limited liability company: MOBILOT, LLC	
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	700 WEST MORSE BLVD., SUITE 220 WINTER PARK, FL 32789
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	700 WEST MORSE BLVD., SUITE 220 WINTER PARK, FL 32789
1/7/20	013	L13000002765
3. D a	ite of filing/registration in Florida	4. Document number
5. (a	Registered Agent and Registered Office shown on t	
	Registered Agent:	CS Sunbiz, LLC
	Registered Office Address:	1551 SANDSPUR ROAD MAITLAND, FL 32751
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
	NEW Registered Agent:	CS Sunbiz, LLC
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	700 WEST MORSE BLVD., SUITE 220
		WINTER PARK, FL 32789 ,FL 32789
confinand the included in the including the including the including the included in the includ	limited liability company is not organized under the larmed that after the change or changes are made, the Flore business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise perating agreement of the limited liability company. The office of a member or authofized representative of a member	orida street address of the registered office
1300	1	-
By:	by accept the appointment as registered agent and as ly with the provisions of all statutes relative to the provisions of all statutes relative to the provision of my poster 608, F.S. Or, if this document is being filed to mer ss, hereby confirm that the limited liability company when of Registered Agent Sarah Schwemin	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25,00