(Re	equestor's Name)					
(Ad	Idress)					
(Ac	dress)					
(Cir	ty/State/Zip/Phone	#)				
PICK-UP	WAIT	MAIL				
(Bı	usiness Entity Nam	ne)				
(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to	Filing Officer:					
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Office Use Only



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RIACHS

MAY 02 2014

R. WHITE



ACCOUNT NO. : I2000000195									
REFERENCE : 113678 7684731									
AUTHORIZATION: Spelle Rena									
COST LIMIT : \$ 25.00									
ORDER DATE: April 30, 2014									
ORDER TIME : 9:46 AM									
ORDER NO. : 113678-010									
CUSTOMER NO: 7684731									
CHANGE OF AGENT									
NAME: AIRFAIR WIRELESS, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Susie Knight EXT# 52956									
EXAMINER:									

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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	ame of the limited liability company: Airfair Wireless	LLC			
2.	(a)		ſ	b)		
	•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ()	Mailing address of lin	nited liability company: OST OFFICE BOX)
		250 Williams Street, Suite 250				
		Atlanta GA 30303			<u> </u>	
		2/8/2013		L1300002		
3.		Date of filing/registration in Florida	4.		Document number	er
5.	(a)	Registered Agent and Registered Office shown on the records of t			_	
		Registered Agent and Registered Office shown on the records of t	he Florida	a Dept. of State	: :	
		Tobin & Reyes, P.A.			-	
		Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS	<u>57</u>		
		5355 Town Center Road, Suite 204			-	
		Boca Raton , FL	33486	3	2	
				······································	-	社员 茅
	(b)	Corporation Service Company				Territoria series
		Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		
		1201 Hays Street				
		NEW Registered Office Address:				FOR CO. THE NAME OF THE PARTY O
						පුළි ය
						<i>2</i> 00
		Tallahassee , FL	32301		•	
the age was	char nt w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regi bility co f the lim	stered office ompany, it is lited liability liability com	and the business hereby confirmed company or as o apany.	office of the registered d that the change(s) therwise provided in
		1000/1-		Michae	Printed or typed nam	71)+
	_	are of a member or authorized representative of a member				-
In prothe to noting	ereb visio obli nere ified	y accept the appointment as registered agent and agreens of all statutes relative to the proper and complete i gations of my position as registered agent as provided by reflect a change in the registered office address, I h in writing of this change.	ee to act perform I for in (pereby co	in this cape ance of my d Chapter 605 onfirm that i	icity. I further ag luties, and I am fa , F.S. Or, if this a the limited liabilit Sue G. Knighl	ree to comply with the tmiliar with and accept locument is being filed y company has been
Sig	nardy	of Registered Agent Corporation Service Company	BY:	Assis	stant Vice Pres	sident

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