000 1035 23 Division of Q rporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE AERIAL WIRELESS SERVICES, LLC

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Corporate Filing Menu

Help

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	me of the limited liability company: Aerial Wireless Se	rvices	LLC		
2.	(a)	121 W LONG LAKE ROAD		(b) 121 W LONG LAKE ROAD		
	(-) .	Principal office address of limited liability company: (Note: MUST BF STREET ADDRESS)	_	(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		3RD FLOOR		3R	D FLO	OR
		BLOOMFILED HILLS, MI 48304	_	BI	.ООМР	TILED HILLS, MI 48304
		07/22/2013		L13	000103	523
3.		Date of filing/registration in Florida	4.		4 .	Document number
5. (a)	(a)	GAFFNEY, CORY				
	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				te:
		Registered Office Address (MUST BE FLORIDA STREET A	DDRE	SS)		-
		300 1ST AVENUE, S.				2015 ALL
	•	TIERRA VERDE , FL		3	3715	FILI 2015 OCT 30 SEURETARY ALLAHASSE
(1	<i>(</i> L)	C T Corporation System				CT 30 HASSEE
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		·				ORIDA ORIO ORIO ORIO ORIO ORIO ORIO ORIO ORI
		NEW Registered Office Address:				- #5
		1200 South Pine Island Road				_
		Plantation FL	33324			
the age was	cha nt w s/we arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	s of t the re bility the l imite	he Sta gistere comp imited d liabi	ed offic any, it liabili lity cor	ee and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
		adison Brennan	<u>N</u>	ladison	Brenns	
I h pro the to I not C T By:	erel ovisi obli nere ified Co	thy accept the appointment as registered agent and agree on so of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change. Rebect of Registered Agent				Printed or typed name of signce pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been ant Secretary