(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 522637 7539619						
AUTHORIZATION: Squelle Ban						
COST LIMIT : \$ 25.00						
ORDER DATE : November 19, 2020						
ORDER TIME : 1:54 PM						
ORDER NO. : 522637-005						
CUSTOMER NO: 7539619						
CHANGE OF AGENT						
NAME: WHITE GLOVE WIRELESS, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker EXT#						
EXAMINER:						

CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195						
REFERENCE : 522637 7539619						
AUTHORIZATION : Spellice Page						
COST LIMIT : \$25.00						
ORDER DATE : November 19, 2020						
ORDER TIME : 1:54 PM						
ORDER NO. : 522637-005						
CUSTOMER NO: 7539619						
CHANGE OF AGENT						
NAME: WHITE GLOVE WIRELESS, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker EXT#						

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. N	ame of the limited liability company: White Glove Wi	ireless, L	LC	
2 (a)		(I	o)	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	. N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	4400 Bayou Boulevard, Suite 44B		4771 Bay	ou Boulevard, Box 203
	Pensacola FL 32503		Pensacola	FL 32503
	1-2-2015		L15000004	006
3.	Date of filing/registration in Florida	- 4.		Document number
<i>-</i> .				
5. (a)	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of State	- E
	Rebecca J. Ferguson		·	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			. 2021
	4771 Bayou Boulevard, Suite 203			
		20502		2020 NOV 20
	Pensacola, FI	L		20
				A
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office of	Idraes:	A T
	Elici lenie di MEN NEKRICIEN ARCII	K V LLKE A	MIXII.	÷.
	Corporation Service Company			03
	NEW Registered Office Address:			•
	1201 Hays Street			
	Tallahassee	L_32301		
	, FI	Ա		-
change agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liercauthorized by an affirmative vote of the members of icles of organization or the operating agreement of the	register ability co of the lin limited	ed office and ompany, it is nited liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
Sign	nure of a member or authorized representative of a member	_		Printed or typed name of signee
I here provis the ob- to mer	by accept the appointment as registered agent and aginous of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act perform d for in (hereby c	t in this capa ance of my d Chapter 605, onfirm that t	city. I further agree to comply with the htties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
Signati	are of Registered Agent			

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

INHS18 (2/14)