## ...LIROCOUTSUIS:

(Re	equestor's Name)
(Ac	ldress)
<b>(</b> ) -	,
(Ac	dress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	Office Use Only



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## **COVER LETTER**

Division of Corporations			
SUBJECT: Proximiti Mobility, LLC.			
	e of Limited Lia	ability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing	<del>,</del>
Please return all correspondence concerning thi	s matter to the f	following:	
Donald C. Davis			
Name of Person			
Proximiti Mobility, LLC			
Firm/Company		<del>-</del>	
205 South Hoover Blvd, Suite 300			
Address		_	
Tampa, FL 33609			
City/State and Zip Code		_	
don.davis@proximiti.com			77.7
E-mail address: (to be used for future ann	ual report notifi	ication)	1
For further information concerning this matter,	please call:		ZENT COT 12 P
Donald C. Davis	813	579-1036	U E
Name of Person	(	Area Code & Daytime Tele	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	30 10:		
Enclosed is a check for the following	amount:		
☑ \$25 Filing Fee	<b>□</b> \$5	55 Filing Fee & Certified Cop	ру
INHS18 (2/14)			

## 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: Proximiti Mo	bility, LL	С				
2. (a)	205 South Hoover Blvd, Suite 300	(b)	(b) 205 South Hoover Blvd, Suite 300				00
(-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of lim (Note: MAY BE PO				-	
	Tampa, FL 33609		Tampa, I	FL 33609			
		_					
	2/6/2008		L0800001	3438	<u> </u>		
3.	Date of filing/registration in Florida	4.		Document	number		
5. (a)							
	Registered Agent and Registered Office shown on the records of Donald C. Davis	î the Florida	Dept. of State	:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	1				
	5410 Mariner Street, Suite 175						
	Tampa	33609					
	,11	<u>-</u>					
(b)							
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office add	<u>lress</u> :				
	Donald C. Davis				IXLLAHASS	2317 OCT	211-11E
	NEW Registered Office Address:					001	1 }
	250 South Hoover Blvd, Suite 300				A.S.S.	1.2	
	Tampa	L_33609			řn U m.	Ū	
1645-1			C4-4 6 F1-			بې .دان کي	
the cha agent v was/w	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regis iability co of the lim e limited l	stered office impany, it is ited liability	and the bushereby covorony company apany.	isiness: of infirmed the or as othe	fice of the hat the c	ie registered hange(s)
Signa	iture of a member or authorized representative of a member			Printed or ty		fsignee	
I here provisi the obi to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide lely reflect a change in the registered office address, I din writing of this change	ree to act e performa ed for in C hereby co	in this cape ance of my e hapter 605 onfirm that t	acity. I furi duties, and , F.S. Or, i the limited	ther agree I am fam if this doc liability c	e to com iliar with ument is company	ply with the h and accept heing filed has been
Signatu	ire of Registered Agent						