Requester's Name HSD FUNCS Blvd. Address Sity/State/Zip Phon	00002 Hows Lite Stem L 32114	3000047009730 -11/30/0101077009
CORPORATION NAME(S) & DO	11/30	*****25.00 *****25.00 Office Use Only nown):
1. W01000023010 (Corporation Name)	(Document #)	
2. (Corporation Name)	(Document #)	·····································
3(Corporation Name)	(Document #)	FIL OJ NOV 30 SECRETARY TALLAHASSE
4(Corporation Name)	(Document #)	FILED 30 PM RY OF SSEE. I
☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Photocopy	Certified Copy Copy Copy Copy Copy Copy Copy Copy
NEW FILINGS	<u>AMENDMENTS</u>	
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A Change of Register Dissolution/Withdom	red Agent
OTHER FILINGS	REGISTRATION/QU	ALIFICATION
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnershi ☐ Reinstatement ☐ Trademark ☐ Other	p
		Evaminar's Initials

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. The name of the limited liability company is: Visia Communications LLC 2. The mailing address of the limited liability company is: 10-10-2001 M-01000002306 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: NRAI Services, Inc. Name 526 E. Park Avenue Address Tallahassee, FL 32301 City, State and Zip 6. The name and address of the new registered agent and/or office: Florida street address (P.O. Box NOT acceptable) If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Reth Wielex (Printed or typed name of signee) I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

(Signature of Registered Agent)