MO2000003461

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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

BO1	H FOR LIMITED LIAI	MLITT COMPANT	Ol the
Pursuant to the provisions of liability company submits the fagent, or both, in the State of Fi	sections 608.416 or 608. ollowing statement in ord orida.	508, Florida Statutes ler to change its regis	the understaned Hingled stered office or registered TALLAHASSES STATE
1. The name of the limited liab	lity company is: SUNTER	RRA COMMUNICATION	IS, LLC FLORIO
2. The mailing address of the li	mited liability company is	: 3865 West Chevenne	e Avenue
North Las Vegas, NV 89032			. ·
December 26, 2002		M02000003461	
3. Date of filing/registration in Florida		4. Document number	
5. The name of the registered ag Florida Department of State:	ent and the registered off	ice address as shown o	on the records of the
CTC	Corporation System		
	Name		· ·
1200	South Pine Island Road		
	Address		
_Plant	ation, FL 33324		
	City, State and	1 Zip	
6. The name and address of the	new registered agent and/	or office:	
NRAI	Services, Inc.		
Name			
	. Park Avenue		•
Flor	rida street address (P.O. B	ox NOT acceptable)	
Tallah	assee FL 32		
	City, State and	Zip	
If the limited liability company confirmed that after the change and the business office of the reliability company, it is hereby cathe members of the limited liability operating agreement of the l	or changes are made, the gistered agent will be iden onfirmed that the change(ility company or as othery	Florida street address on tical. Or, in the case of was/were authorized vise provided in the art	of the registered office of a Florida limited d by an affirmative vote of
L. L.	P		
Signature of a member or authorized rep	resentative of a member)		
low Knobl Attornov la Past			
Lori Knohl, Attorney-In-Fact (Printed or typed name of signee)		 ·	
· • • • • • • • • • • • • • • • • • • •	nt an magintana I access I	acres to act in this	manitus T. G. well
I hereby accept the appointment comply with the provisions of a sand I am familiar with and acceptanter 608, F.S.—Or, if this do address, I hereby confirm that the NEAL Society of the confirm that the NEAL Society of the confirm that the confirmation that the confirmatio	i us registerea agent and I statutes relative to the p pt the obligations of my p cument is being filed to m he limited liability compa	agree to act in this cal roper and complete pe osition as registered a erely reflect a change ny has been notified in	vacity. I further agree to exformance of my duties, igent as provided for in In the registered office I writing of this change.

(Signature of Registered Agent)
Paul J. Hagan, Assistant Secretary
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25.00**