## M03000003770

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CSC - WILMINGTON Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Katie Boese kboese@cscinfo.com

Date: December 30, 2013

Order#: 924722-020

Re: PARAGON COMMUNICATIONS SERVICES, L.L.C.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Katie Boese

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA



January 8, 2014

KATIE BOESE C/O CORPORATION SERVICE COMPANY 2711 CENTERVILLE ROAD, SUITE 400 WILMINGTON, DE 19808

SUBJECT: PARAGON COMMUNICATION SERVICES, L.L.C.

Ref. Number: M03000003770

We have received your document for PARAGON COMMUNICATION SERVICES, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 414A00000468

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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. Name of the limited liability company: PARAGON COMMU	INICATION SERVICES, L.L.C.	
2 (a) Principal office address of timited liability common	nv: 4485 Tench Road	TALL TALL
<ol> <li>(a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)</li> </ol>	Ste 420	
(Mot. Most be BIRELL ADDRESS)	Suwanee, GA 30024	
		<i>₹</i>
(b) Mailing address of limited liability company:	P.O, 8ox 3327	<u> </u>
(Note: MAY BE POST OFFICE BOX)	Suwanee, GA 30024	
		95. 5
11/12/2003	M03000003770	<u> </u>
3. Date of filing/registration in Florida	4. Document number	•
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida De	pt, of State:
Registered Agent:	C T Corporation System	12
Desistand Office Address	1200 South Pine Island Road	
Registered Office Address:	Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> <u>NEW</u> Registered Agent:	Corporation Service Company	<u></u>
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
(MOST DE LEORIDA STREET ADDICESS)	Tallahassee	,FL 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the re- intical. Or, in the case of a Flo- (s) was/were authorized by an a- wise provided in the articles of	egistered office rida limited affirmative vote of
Mark McCullough .		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my Chapter 605, F.S. Or, if this document is being filed to it address, I hereby confirm that the limited liability compo	l agree to act in this capacity. proper and complete performa position as registered agent as nerely reflect a change in the r iny has been notified in writing	I further agree to nce of my duties, provided for in egistered office g of this change.
Sym august		
Signature of Registered Agent		