## M-05000000000007

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O7 NOV 30 AM ID: 57
SECRETARY OF STATE
AND AM SSEE, FLORIDA



200 West Adams Street, Suite 2007 Chicago, IL 60606 (312) 346-3606 (800) 934-2556 Fax: (312) 346-3607

November 26, 2007

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State. 409 E. Gaines Street Tallahassee, FL 32399

RE: BIG Wireless, LLC

07 NOV 30 AM IO: 57
SECRETARY OF STATE
FALLAHASSEE. FLORIDI

Dear Sir or Madam:

Enclosed please find one original and one photocopy of the form to change the registered agent/office for the above captioned in your state. Also enclosed is a check for the required fee.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Jeffrey R. Graves JRG Encl.

## 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:	BIG Wireless, LLC	<u> </u>
2. The mailing address of the limited liability com	npany is :	<u> </u>
156 N. George Street York, Pennsylvania 17401		<u> </u>
5/18/2005	M05000002657	
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registe Florida Department of State:	ered office address as shown on the record	rds of the
CT Corporation System		_
	Name	PSE 97
1200 South Pine island R	load	ACR NO
A	ddress	TO V
Plantation, FL 33324 City, State and Zip		NOV 30 AM IO: 5
6. The name and address of the new registered age	nt and/or office:	E FE
NDAL Condess Inc		IOR STA
NRAI Services, Inc.	ame	<b>高州</b> 二
2731 Executive Park Drive		<i>P</i>
	P.O. Box NOT acceptable)	
Weston	FL 33331	
	te and Zip	
If the limited liability company is not organized un confirmed that after the change or changes are mad and the business office of the registered agent will liability company, it is hereby confirmed that the cl of the members of the limited liability company or or the operating agreement of the limited liability company or or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability company or the operation of a member or authorized representative of a member)	le, the Florida street address of the regist be identical. Or, in the case of a Florida hange(s) was/were authorized by an affi- as otherwise provided in the articles of	tered office a limited rmative vote
Fred Dailey		
(Printed or typed name of signee)		
I hereby accept the appointment as registered ager comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability of NRAI Services. Inc.	nt and agree to act in this capacity. I fur the proper and complete performance of my position as registered agent as pro ad to merely reflect a change in the regis company has been notified in writing of	rther agree to of my duties, wided for in stered office this change.
(Signature of Registered Agent)		

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