

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561) 694-8107
Fax Number : (561) 694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

2016 JUN 17 AM 09:03

TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT CHANGE TELX MANAGEMENT SERVICES, LLC

Certificate of Status	0
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Page Count	02
Estimated Charge	\$25.00

JUN 20 2016

S. YOUNG

16 JUN 17 PM 2:50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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. Name of the limited liability company: TELX MANAGEMENT SERVICES, LLC
2. (a) 4 EMBARCADERO CNTR, STE 3200
Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
SAN FRANCISCO, CA 94111
- (b) 4 EMBARCADERO CNTR, STE 3200
Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
SAN FRANCISCO, CA 94111
3. 01/30/2007
Date of filing/registration in Florida
4. M07000000581
Document number
5. (a) CORPORATION SERVICE COMPANY
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
1201 HAYS STREET
Registered Office Address (Note: MUST BE FLORIDA STREET ADDRESS)
TALLAHASSEE, FL 32301-2525
- (b) NRAI SERVICES, INC.
Enter name of NEW Registered Agent and/or NEW Registered Office address:
1200 SOUTH PINE ISLAND ROAD
NEW Registered Office Address:
PLANTATION, FL 33324

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STATE
SECRETARY OF
TALLAHASSEE, FLORIDA
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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.

JOSHUA MILLS, SENIOR VICE PRESIDENT, GENERAL COUNSEL AND SECRETARY

Signature of a member or authorized representative of a member

Printed or typed name of signer

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 605, 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.

Signature of Registered Agent

JUDY CULVER, ASSISTANT SECRETARY

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

FILING FEE: \$25.00