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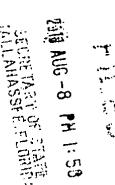
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PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: August 6, 2019

Order#: 840631-020

Re: SMART CITY NETWORKS OF ORLANDO, LLC

Enclosed please find:

<u>XX</u> 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.

<u>XX</u> Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ashley Seeman

c/o Corporation Service Company

251 Little Falls Drive 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



* 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: SMART CITY N	ETWOR	S OF ORL	ANDO, LLC
2. (a)) 3100 Bonnet Creek Road PO Box 22555	(b)	РО Вох	: 22555 3100 Bonnet Creek Road
•	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,	N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Lake Buena Vista FL 32830-2555	_ _	Lake Bue	ena Vista, FL 32830-2555
	08/01/2008		M0800000	03608
3.	Date of filing/registration in Florida	4.		Document number
5. (i	n) NRAI SERVICES, INC			
	Registered Agent and Registered Office shown on the records of t	the Florida	Dept, of State	:
	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREET A	(ADDRESS)		~3
	Plantation .FL	33324		ALL
, (b	Corporation Service Company			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add:	<u>ress</u> :	
	1201 Hays Street			3.0
	NEW Registered Office Address:			
	Tallahassee . FL	32301		
the ch agent was/v	limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registability cor the limit	ered office npany, it is ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	Jul E. Come	Jill Ci		ized Person
_	nature of a member or authorized representative of a member			Printed or typed name of signee
provi. the ol to me	eby accept the appointment as registered agent and agrossions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address. I hed in writing of this change.	performa d for in Ci	nce of my d hapter 605.	luties, and I am familiar with and accept F.S. Or, if this document is heiny filed
Signa	nure of Registered Agent Corporation Service Company	BY: Gr	ace E. Kirl	by, Asst. Vice President