Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010

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

Email Address: _

LLC REGISTERED AGENT CHANGE **MIL-SAT LLC**

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY $\frac{1}{2}$ $\frac{1}{2}$

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.

rwnac			_				
l. Na	me of the limited liability company: MIL-SAT	LL(<u> </u>				
2. (a)	318 BANK STREET		(b) 318	BANK STREET			
z. (n)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
			PO B	OX 189			
	SURRY, VA 23883	SURRY, VA 23883					
	04/02/09		M0900	00001293			
3.	Date of filing/registration in Florida	4.		Document numbe	r		
5. (a)	WRIGHT, THOMAS D						
J. (4)	Registered Agent and Registered Office shown on the records of	f the Flor	ida Dept. of Stat	- e:			
	9711 OVERSEAS HWY						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRI	(SS)	-			
(b)	MARATHON	L <u>33</u>	050	-		2022 APR -8	FIL
(47)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office	address:	-	2.71	8	mas:
	7901 4th St N			_		P# 2:	,
	NEW Registered Office Address:				777	0	
	STE 300			_			
	St. Petersburg	_{L_} 337	02	_			
the cha agent was/w the art	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the re liability of the	egistered offic company, it i limited liabili	e and the business is hereby confirmed ty company or as o	office of	chan	ge(s)
	dure of a member or authorized representative of a member	.		Park Printed or typed nam			
Signa	dure of a member or authorized representative of a member			Printed or typed nam			uniale ale e

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.

Bill Havre - Assistant Secretary

Signature of Registered Agent