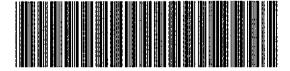
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C. LEWIS

MAR 3 0 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	•			
SUBJECT: INET COMMUNICATIONS LLC (Name of Limited Liability Company)				
(Pull	ne of Emined Elability Company)			
Dear Sir or Madam:				
The enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.			
Please return all correspondence concern	ing this matter to the following:			
	•			
DOLORES BURTON				
(Name of Person)				
UNITED CORPORATE SERVICE (Firm/Company)	ES INC.			
11 NORTH PEARL STREET, SUI	TE 1601			
(13441635)	•			
ALBANY, NEW YORK 12207				
(City/State and Zip Code)				
For further information concerning this m	natter, please call:			
DOLORES BURTON	at (877) 8949049			
(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the follow	wing amount:			
2 \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			

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. Name of the limited liability company:	INET COMMUNICATIONS LLC			
2. (a) Principal office address of limited liability company:		7 Fanueil Marketplace		
(Note: MUST BE STREET ADDRESS)	Bosto	n,MA: 02109		
(b) Mailing address of limited liability company:				
(Note: MAY BE POST OFFICE BOX)	7 Fanueil Marketplace Boston MA 02109			
. 8/4/2011		M1 1000003	39 29	
3. Date of filing/registration in Florida	4. Doci	ament number	置的	7
5. (a) Registered Agent and Registered Office show	on the reco	rds of the Florida D	ept. of Sta	FIL 1ARE29
Registered Agent:	NRAL	Services, Inc.	<u> </u>	
Registered Office Address:		Park Avenue assee, FL 32301		D PH, : 2
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u>	United	United Corporate Services, Inc. 9200 South Dadeland Blvd.		
MUST BE FLORIDA STREET ADDRESS)	(S) Suite 508			
	Miami		.FL <u>33</u>	156
If the limited liability company is not organized under confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the chan of the members of the limited liability company or as or the operating agreement of the limited liability company of the operating agreement of the limited liability company or as sometimes of a member or authorized representative of a member	the Florida str identical. Or, ige(s) was/wei otherwise pro	eet address of the re- in the case of a Flores	gistered o	office ed
Charles Murray, Member Printed or typed name of signee				
I hereby accept the appointment as registered agent a comply with the pravisions of all statutes relative to the and I am familiar with and accept the obligations of m Chapter 608. F.S. Or, if this document is being filed to address. I hereby confirm that the limited liability com	ind agree to a ve proper and ny position as i ny merely reflec pany has been AAA	et in this capacity. I complete performant egistered agent as a change in the real thing the performant in the real thing the performant in the performant i	l further a ice of my i provided j gistered o of this ch	igree to duties, for in office ange.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: S25.00