M1000003929

| (Requestor's Name) | | |
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| (Ad | dress) | |
| | | |
| (Address) | | |
| | | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (Bu | siness Entity Nar | me) |
| | | |
| (Do | cument Number) | |
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| Certified Copies | _ Certificates | s of Status |
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| Special Instructions to | Filing Officer | |
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Office Use Only



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Change

05/07/14--01024--015 **25.00



DP 5/19/14



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: May 5, 2014

Order#: 116012-013

Re: INET COMMUNICATIONS LLC

Enclosed please find:

XX 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.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Morgan Kennedy

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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. N | ame of the limited liability company: INET COMMU! | NICATIONS LL | .C |
|--|--|--|---|
| 2. (a) | 7 FANUEIL MARKETPLACE | (b) | |
| () | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of timited liability company: (Note: MAY BE POST OFFICE BOX) |
| | BOSTON, MA 02109 | | |
| | 08/04/2011 | M1 | 1000003929 |
| 3. | Date of filing/registration in Florida | 4. | Document number |
| 5. (a) | UNITED CORPORATE SERVICES, INC. | | |
| υ. (α) | Registered Agent and Registered Office shown on the records of | the Florida Dept. | of State: |
| | 9200 SOUTH DADELAND BLVD. | | |
| | Registered Office Address (MUST BE FLORIDA STREET | ADDRESS) | |
| | | | |
| | SUITE 508 | *** | |
| | MIAMI , FI | _ 33156 | FILED FILED |
| (b) | Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered | 1 Office address: | FILED PH 4: 36 MILLANASSEE, FLORIDA |
| | 1201 Hays Street | | , |
| | NEW Registered Office Address: | | |
| | | | |
| | Tallahassee , F(| 32301 | |
| the chagent was/w the art Signa I here provis the obto mer | limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the authorized representative of a member of authorized representative of a member or authorized representative of a member or authorized representative of a member of all statutes relative to the proper and complete lingations of my position as registered agent as provide rely reflect a change in the registered office address, I add in writing of this change. | f the registered lability compar of the limited lability compared in the limited lability compared in the lability control of the lability compared to the la | office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company. Printed or typed name of signee is canacity. I further agree to comply with the |

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

Signature of Registered Agent Corporation Service Company BY: SYLVIA QUEPPET, ASST. VICE PRESIDENT