

M1100000 5002

Florida Department of State
Division of Corporations
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TALLAHASSEE, FLORIDA

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FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Kimberly Laughrey
DATE	2018-02-02 15:25:09 CST
RE	NEXTLINK WIRELESS, LLC

COVER MESSAGE

Thank You,

Nicole Diffenbaugh
Fulfillment Specialist
CT Corporation

Team (614) 280-3338
GlobalFulfillmentTeam@wolterskluwer.com



1209 N Orange Street
Wilmington, DE 19801
www.wolterskluwer.com

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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: NEXLINKWIRELESS, LLC

2. (a) Principal office address of limited liability company: ONEVERIZONWAY BASKINGRIDGE,NJ07920 (b) Mailing address of limited liability company: ONEVERIZONWAY BASKINGRIDGE,NJ07920

3. Date of filing/registration in Florida: 10/03/2011 4. Document number: M11000005002

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: CORPORATIONSERVICECOMPANY Registered Office Address: 120 HAYS STREET TALLAHASSEE, FL 32301-2525

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: CTCorporationSystem NEW Registered Office Address: 1200 South Pine Island Road Plantation, FL 33324

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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.

Signature of member or authorized representative of a member: P Belanger

Printed or typed name of signee: Patricia Belanger, Member

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.

By: James M. Halpin Assistant Secretary

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