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(D		·
(кеді	uestor's Name)	
(Addı	ress)	
(Addı	ress)	
(City/	/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
		
(D)		
(Busi	ness Entity Nam	ne)
(Doci	ument Number)	
Certified Copies	Certificates	of Status
		1
Special Instructions to Fi	ling Officer:	

Office Use Only



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2014 HAY 15 P 12: 03 SECRETARY OF STATE ALLAHASSEE, FLORIDA

MAY 2.8 TOIS



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Katie Boese kboese@cscinfo.com

Date: May 13, 2014

Order#: 116585-015

Re: RELIANCE 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: Katie Boese

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.	Na	me of the limited liability company: RELIANCE COM	MUNICATION	IS, LLC
2	(a)	718 University Ave. STE 200	(b)	
۷.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Los Gatos, CA 95032		
		05/23/2013	M130	000003283
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	NRAI Services, Inc.		
٥.	(4)	Registered Agent and Registered Office shown on the records of the	ne Florida Dept. o	f State:
		1200 South Pine Island Road		7A. 21
		Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)	ZONA MAY
				AREA SERVICE S
			•	
		Plantation , FL	33324	17 m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		10 30 10 10 10 10 10 10 10 10 10 10 10 10 10		~~~
	(b)	Corporation Service Company		R\$ 12
		Enter name of NEW Registered Agent and/or NEW Registered (Office address:	— <u> </u>
		1201 Hays Street		
		NEW Registered Office Address:		
		Tallahassee FI.	32301	
				
the ag wa	ent v ent v	imited liability company is not organized under the law- inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited liab- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li-	the registered of bility company the limited lia	office and the business office of the registered to it is hereby confirmed that the change(s) ability company or as otherwise provided in
_		026 2	Dona Priet	pe, Authorized Person
	Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
pr the to	ovisi e obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I ha I in writing of this change.	te to act in this performance of for in Chapter ereby confirm	capacity. I further agree to comply with the f my duties, and I am familiar with and accept r 605, F.S. Or, if this document is being filed that the limited liability company has been
	L	him anyther		

Signature of Registered Agent Corporation Service Company BY: Sylvia Queppet, Asst. VP

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

FILING FEE: \$25.00

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1 10/11	au.			
1. N	Name of the limited liability company: RELIANCE CO	MMUNICATIO	NS, LLC	
2 (a)	718 University Ave. STE 200	(b)		
2. (u	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	:
	Los Gatos, CA 95032			
	05/23/2013	M1	3000003283	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	NRAI Services, Inc.			
(b	Registered Agent and Registered Office shown on the records of 1200 South Pine Island Road Registered Office Address (MUST BE FLORIDA STREET Plantation , F Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registere 1201 Hays Street NEW Registered Office Address:	(ADDRESS) L33324	2014 HAY 15 SECRETARY OF TALLAHASSEE	
the clagent	Tallahassee , F limited liability company is not organized under the la hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited l	aws of the State of the registered liability compa	e of Florida, it is hereby confirmed that aft d office and the business office of the regis ny, it is hereby confirmed that the change(stered s)
the a	were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	e limited liabil	ity company.	111
	0-62	Dona Pri	ebe, Authorized Person	
Sig	nature of a member or authorized representative of a member		Printed or typed name of signee	

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.

Signature of Registered Agent Corporation Service Company BY: Sylvia Queppet, Asst. VP