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Division of Corporations

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LLC REGISTERED AGENT CHANGE SWITCH & DATA LLC

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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.

I. N	ume of the limited liab	ility company: Switch & Da	ala LLC	<u> </u>				
2. (a)				ሌ)			
/	Principal office ad (Note: MUS	dress of limited liability company:		(U	,	Mailing address of limited l		
	ONE LAGOON	OR 4TH FLOOR			ONE LA	GOON DR 4TH F		_
	REDWOOD CIT	Y, _i CA 94065	<u> </u>		REDWO	DOD CITY, CA 940)65	
			•		172		-	
	07/19/2013				M130000	04540		
3.		registration in Florida	4.	-		Document number		
5. (a)	Registered Agent and Regis	istered Office shown on the records of	Ciba Pla	- 1-	D (C	•		
	I	IG SERVICES, LTD	oi une rioi	nua	Dept. of State	:: . •	~3 ~3	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					•	=======================================	
	1540 GLENWAY	' D'RIVE						••,
	TALLAHASSEE	, F	_L 3230	1		•	ro	
	1					::	** .,	
(b)		lered Agent and/or NEW Registers		_				
	Enter name of NEW Regis	lered Agent and/or NEW Registers	ed Office	<u>edd</u>	ten:		<u>ල</u>	
	United Agent Gro	up Inc.				•	=	
	NEW Registered Office A	ddress:						
	11380 Prosperity	Farms Road #221E						
	Palm Beach Gard	ens , F	L 3341	0	1 .			
the cha agent v was/we	inge or changes are mai vill be identical. Or, in tre authorized by an aff	y is not organized under the lade, the Florida street address of the case of a Florida limited firmative vote of the members the operating agreement of the	of the re- liability of the l	gist cor imi	ered office upany, it is ted liability	and the business office hereby confirmed that company or as otherw	e of the re	gistered
			S	aν	annah Mo	ntalban, Attorney-	in-Fact	
		ed representative of a member		_	•	Printed or typed name of s	•	
I herei provisi Ne abli lo mere notifico	by accept the appointm ons of all statutes relating igations of my position by reflect a change in the writing of this char	ent as registered agent and agive to the proper and completed us registered agent as providing registered office address, lige	e perjor led for in l hereby	ma 1 C. co.	nce of my d hapter 605, afirm that i	luties, and I am familia F.S. Or, if this docum he limited liability con	o comply t ar with an nent is bei npany has	with the d accept ng filed been
	re of Registered Agent	Jenisa Iriz	≖rry, S	pe	ciel 30cf0	Kary		
1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		D			TT 447		
15.15.73.	Div	ision of Corporations P.O. FILING	BOX 63 FEE; \$2	270) Tailabass	see, FL 32314		•

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