Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210000977823)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

D Email Address:_ →

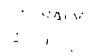
LLC REGISTERED AGENT CHANGE INSITE TOWERS DEVELOPMENT, LLC

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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.

l. N	ame of the limited liability company: InSite Towers De	evelopme	nt, LLC	
2. (a)			b)	
~. (w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		M	ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1199 N Fairfax St. STE 700		1199 N Fair	fax St STE 700
	Alexandria, VA 22314		Alexandria.	VA 22314
	02/10/2014		M140000010	51
3.	Date of filing/registration in Florida	4.		Document number
5. (a	COGENCY GLOBAL INC.			
), (a	Registered Agent and Registered Office shown on the records o	f the Floric	la Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
	115 NORTH CALHOUN STREET SUITE 4			
	TALLAHASSEE, F	L_32301		
41. 1	C T Corporation System			
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office a	ddress:	THE THREE TO PA 5: 46
	NEW Registered Office Address:			
	1200 South Pine Island Road			
	<u>Plantation</u> , F	L_33324		
the chagent	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the reg liability of of the li ne limited	company, it is mited liability I liability con	s hereby confirmed that the change(s) y company or as otherwise provided in apany.
	/s/ Christine Brennan	Ch —	ristine Brenna	n. Assistant Secretary
-	ature of a member or authorized representative of a member			Printed or typed name of signee
provi the oil to me	ehy accept the appointment as registered agent and a sions of all statutes relative to the proper and complet bligations of my position as registered agent as provide rely reflect a change in the registered office address, a ed in writing of this change. CT Corporation System Ist Michele Holden, Asst Sect	gree to a le perfor ded for in I hereby	et in this cape mance of my of Chapter 602 confirm that	ucity. I further agree to comply with the duties, and I am familiar with and accept S.F.S. Or, if this document is being filed the limited liability company has been
Signa	ture of Registered Agent			
				TTE 1514