

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)222-1092
Fax Number : (850)878-5368

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

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
RNS COMMUNICATIONS, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

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DIVISION OF CORPORATIONS
STATE OF FLORIDASTATE OF FLORIDA
TALLAHASSEE, FLORIDA

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Electronic Filing Menu

Corporate Filing Menu

Help

Power of Attorney


NOTICE IS HEREBY GIVEN THAT RNS Communications Inc ("Corporation"), a corporation incorporated under the laws of New York, does hereby appoint Kelly Lettmann, Michelle Donato, Natalie Pickens, Mandy Hendricks, Dareth Jeffers, Russell Kopp, Crystal McKenzie, Christine Rein, Collin Menkhus, Ryan Nelson, Sarah Revelle, Michelle Buchheit, Ryan Maher, Phally Sea, Jessica Molloy, Traci Houck, Jeffrey Kagan and Michele Lamagna (but only for so long as each of them, respectively, remains an employee of CT Corporation or an affiliate thereof) as attorney-in-fact for the Corporation to act for the Corporation and affiliates and subsidiaries of the Corporation attached hereto as Exhibit A, specifically incorporated herein by reference ("the Subsidiaries") in the Corporation's and Subsidiaries' names for the limited purposes authorized herein.

The Corporation and Subsidiaries hereby grant its attorney-in-fact the power to execute the documents necessary to file annual reports, annual registrations, license renewals, change entities' registered agent and registered office, and forms of similar import on behalf of the Corporation and Subsidiaries in any state and the District of Columbia.

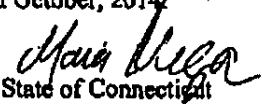
In the execution of any documents necessary for the sole, limited purpose, set forth herein, Jeffrey Kagan and Michele Lamagna shall exercise the power of Vice President, Secretary, Manager, and/or Member.

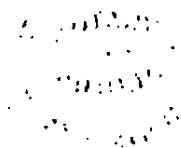
This Power of Attorney expires when revoked by the Corporation or Subsidiaries.

IN WITNESS WHEREOF the undersigned have executed this Power of Attorney on the 30th day of October, 2014



Sworn to and subscribed before me
this 30th day of October, 2014

Maria Vega 
Notary Public, State of Connecticut
Commission Expires: June 30, 2017
Exhibit A



COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RNS COMMUNICATIONS, INC.

Name of Corporation

DOCUMENT NUMBER: F08000004674

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Name of Contact Person

Firm/Company

Address

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Contact Person

at (_____) _____
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2ED45 (03/12)


STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of New York _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: RNS COMMUNICATIONS, INC.
2. The principal office address: 1 SELBECK STREET 3RD FLOOR, NORWALK, CT 06855
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 10/24/2008 Document number: P0800004674
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525
6. The name and street address of the new registered agent (if changed) and/or registered office (if changed):
C T Corporation System
c/o C T Corporation System, 1200 South Pine Island Road
P O Box NOT acceptable
Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.




 Signature of an officer or director

Jeffrey Kagan, Vice President

 Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

C T Corporation System
 By:  10/31/2014

 Signature of Registered Agent Date

If signing on behalf of an entity: Sohan R. Dindyal
Vice President

 Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
 MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
 CR2E045 (03/12)

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