

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1200006281

FILED
Mar 20, 2014
Secretary of State
CC1712897184

Entity Name: ZAYO GROUP, LLC

Current Principal Place of Business:

400 CENTENNIAL PARKWAY SUITE 200
LOUISVILLE, CO 80027

Current Mailing Address:

400 CENTENNIAL PARKWAY SUITE 200
LOUISVILLE, CO 80027

FEI Number: 26-2012549

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CARUSO, DANIEL
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title MGR
Name CASHMAN, GILLIS
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title MGR
Name SIEGEL, JOHN
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title MGR
Name DOWNER, JOHN
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title MGR
Name CHOE, MICHAEL
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title MGR
Name CONNOR, RICK
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title MGR.
Name CANFIELD, PHILIP
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title MGR.
Name FEY, LAWRENCE
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KEN DESGARENNES

CFO

03/20/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title PRESIDENT
Name CARUSO, DANIEL
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title VP CFO
Name DESGARENNES, KEN
Address 400 CENTENNIAL PARKWAY SUITE 200
City-State-Zip: LOUISVILLE CO 80027

Title SECRETARY
Name BEER, SCOTT
Address 400 CENTENNIAL PARKWAY SUITE
 200
City-State-Zip: LOUISVILLE CO 80027