

2014 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M99000000985

Entity Name: FLORIDA NETWORK LLC

Current Principal Place of Business:

4190 BELFORT RD., SUITE 475
JACKSONVILLE, FL 32216

Current Mailing Address:

4190 BELFORT RD., SUITE 475
JACKSONVILLE, FL 32216

FEI Number: 59-3584700

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

F & L CORP
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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 PCEO
Name SHERRER, LINDA H
Address 4190 BELFORT RD., SUITE 475
City-State-Zip: JACKSONVILLE FL 32216

Title EVP
Name HOLLAND BUDNICK, CHRISTY
Address 4190 BELFORT RD., SUITE 475
City-State-Zip: JACKSONVILLE FL 32216

Title MANAGER
Name SCALF, CHRISTINE N
Address 130 LIGE BRANCH LANE
City-State-Zip: JACKSONVILLE FL 32259

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: LINDA H. SHERRER

PRESIDENT AND CEO

06/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date