

B10000000160

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

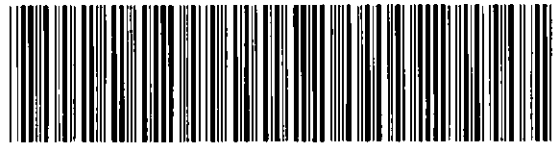
(Business Entity Name)

(Document Number)

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*L P Amend*

2024 NOV -4 AM 9:24

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2024 NOV -4 AM 9:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A. RAMSEY

NOV 5 2024

**CT CORP**  
**(850) 656- 4724**  
**3458 lakesore Drive**  
**Tallahassee, FL 32312**

**Date:** 11/04/2024

Acc#I20160000072

*en: c SW*

|             |                |
|-------------|----------------|
| Name:       | CoreSite, L.P. |
| Document #: |                |
| Order #:    | 15576827       |

|                                   |                          |                         |  |
|-----------------------------------|--------------------------|-------------------------|--|
| Certified Copy of Arts & Amend:   | <input type="checkbox"/> |                         |  |
| Plain Copy:                       | <input type="checkbox"/> |                         |  |
| Certificate of Good Standing:     | <input type="checkbox"/> |                         |  |
| Certified Copy of                 | <input type="checkbox"/> |                         |  |
| Apostille/Notarial Certification: | <input type="checkbox"/> | Country of Destination: |  |
|                                   |                          | Number of Certs:        |  |

|   |  |
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| Filing: <input checked="" type="checkbox"/> | Certified: <input checked="" type="checkbox"/> |
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|   | COGS: <input type="checkbox"/>                 |

Email Address for Annual Report Notifications:

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| Availability _____  |
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| Examiner _____      |
| Updater _____       |
| Verifier _____      |
| W.P. Verifier _____ |
| Ref# _____          |

|                   |
|-------------------|
| Amount: \$ 105.00 |
|-------------------|

Thank you!

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CORESITE, L.P.

\_\_\_\_\_  
Name of Foreign Limited Partnership or Limited Liability Limited Partnership

The enclosed amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Catherine Montegna

\_\_\_\_\_  
Contact Person

CoreSite, L.P.

\_\_\_\_\_  
Firm/Company

1001 17th Street, Suite 500

\_\_\_\_\_  
Address

Denver, CO 80202

\_\_\_\_\_  
City, State and Zip Code

catherine.montegna@coresite.com

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

For further information concerning this matter, please call:

Catherine Montegna

at ( 303 )

222-7312

\_\_\_\_\_  
Name of Contact Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☐ \$61.25 Filing Fee  
and Certificate of  
Status

☐ \$105.00 Filing Fee  
and Certified Copy

☐ \$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

AMENDMENT TO CERTIFICATE OF AUTHORITY  
FOR  
FOREIGN LIMITED PARTNERSHIP OR  
LIMITED LIABILITY LIMITED PARTNERSHIP

FILED  
2024 NOV -4 AM 9:24  
SECRETARY OF STATE  
TALLAHASSEE FL

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:  
CORESITE, L.P.

2. Document Number of Foreign Limited Partnership or Limited Liability Limited Partnership: B10000000160

2. The jurisdiction of its formation is: Delaware

3. The date the entity was authorized to transact business in Florida is: September 30, 2010

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

(If name unavailable in Florida, enter alternate name adopted for the purpose of transacting business in Florida.)

5. If the amendment changes the general partner(s), list the name and business address of each general partner:  
Name: Business Address:

|                                    |                                   |  |
|------------------------------------|-----------------------------------|--|
| <u>CoreSite GP LLC</u>             | <u>1001 17th Street, Ste. 500</u> | <input checked="" type="checkbox"/> Add    |
|                                    | <u>Denver, CO 80202</u>           | <input type="checkbox"/> Remove            |
|                                    |                                   | <input type="checkbox"/> Change            |
| <u>CoreSite Realty Corporation</u> | <u>1001 17th Street, Ste. 500</u> | <input type="checkbox"/> Add               |
|                                    | <u>Denver, CO 80202</u>           | <input checked="" type="checkbox"/> Remove |
|                                    |                                   | <input type="checkbox"/> Change            |
| <u></u>                            | <u></u>                           | <input type="checkbox"/> Add               |
|                                    |                                   | <input type="checkbox"/> Remove            |
|                                    |                                   | <input type="checkbox"/> Change            |
| <u></u>                            | <u></u>                           | <input type="checkbox"/> Add               |
|                                    |                                   | <input type="checkbox"/> Remove            |
|                                    |                                   | <input type="checkbox"/> Change            |
| <u></u>                            | <u></u>                           | <input type="checkbox"/> Add               |
|                                    |                                   | <input type="checkbox"/> Remove            |
|                                    |                                   | <input type="checkbox"/> Change            |

6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

- ☐ The entity elects to be a limited liability limited partnership.
- ☐ The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document’s effective date on the Department of State’s records.

Signature of a general partner:

Catherine B. Montegna

Typed or printed name:

Catherine B. Montegna Assistant Secretary , Coresite GP LLC

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75