

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV -9 PM 7:14

DOCUMENT # **F99000006054**

1. Corporation Name

COLO.COM, INC.

Principal Place of Business

Mailing Address

**2000 SIERRA POINT PARKWAY
BRISBANE CA 94005**

**2000 SIERRA POINT PARKWAY
BRISBANE CA 94005**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

601

Suite, Apt. #, etc.

601

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/22/1999

5. FEI Number

94-3272783

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director 3 | City / State / Zip 4 |
|---------------|---|--|-------------------------|
| CD | SKIBO, CHARLES | 2000 SIERRA POINT PARKWAY | BRISBANE CA 94005 |
| AS | LAMB, ROBERT | 2000 SIERRA POINT PARKWAY | BRISBANE CA 94005 |
| TD | ST. ONGE, DENISE | 2000 SIERRA POINT PARKWAY | BRISBANE CA 94005 |
| D | HA, PERRY | 2000 SIERRA POINT PARKWAY | BRISBANE CA 94005 |
| D | JARVE, JOHN | 2000 SIERRA POINT PARKWAY | BRISBANE CA 94005 |
| D | PATTERSON, ARTHUR | 2000 SIERRA POINT PARKWAY | BRISBANE CA 94005 |

8. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

2101

Suite, Apt. #, Etc.

400003481144-4

City

11/30/00

State

Zip Code

******758.**

FL

******758.75**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Deborah D. Skipper

**Deborah D. Skipper
as its agent**

Date **11-7-00**

REGISTERED AGENT MUST SIGN

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(l), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David H. Stanley

Date

10/25/00

Daytime Phone #

650-292-

0292

CR2E040 (8/00)