L080004763

(R	equestor's Name)			
(A	ddress)			
(Address)				
(C	rity/State/Zip/Phone #)			
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:				
(B	usiness Entity Name)			
(D	ocument Number)			
Certified Copies	Certificates of Status			
Special Instructions to	o Filing Officer:			

Office Use Only



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COVER LETTER

	Registration Se Division of Cor				
SUD IE		E ISLAND COLOCATION, I	LC		
SUBJEC	JI:	Name of Lim	ited Liability Company	···········	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		Bobbie Gilbert			
			Name of Person		
		TREASURE ISLAND CO	DLOCATION, LLC		
			Firm/Company		
•		1395 BRICKELL SUITE	800		三倍 ず
			Address		語とす
		MIAMI, FL 33131		.•	FILEU JUL 28 MII: 40 JUL 28 MII: 40
			City/State and Zip Code		
		admin@ticolo.biz			32 =
For furth	ner information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notifi all:	ication)	高 5
Bobbie (Gilbert		305 760-4621		
	Name o	f Person		Telephone Number	
Enclosed	is a check for th	ne following amount:			
\$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &
	Registr	ING ADDRESS: ration Section on of Corporations	STREET/COURIE Registration Section Division of Corpora	า	

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

TREASURE ISLAND COLOCATION, LLC		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our record imited Liability Company)	5.)
he Articles of Organization for this Limited Liability Cor	npany were filed on	and assigned
orida document number L08000042763	,	
nis amendment is submitted to amend the following:		
. If amending name, <u>enter the new name of the limite</u>	d liability company here:	
ne new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		-4, 7
rincipal office address MUST BE A STREET ADDRE	SS)	
		言言言可
		28 28
nter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		
muning must ess MAT BE AT OST OFFICE BOA		多品 去
		
. If amending the registered agent and/or register gistered agent and/or the new registered office addre		s, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	
	Enier r ioriaa street adares	S.
	, Flo	orida Zip Code
	City	zip coue

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Bobbie Gilbert	1274 Ariana Village Blvd.	Add
		Lakeland FL 33803	_ □ Remove
			Change
MGR	FIRST FRONTIER, LLC		
		1395 BRICKELL SUITE 800	■ Remove
•	·	MIAMI, FL 33131	☐ Change
			AAA
			Remove C
			San Add
·			□ Add
			□ Remove
			□ Add
			□ Remove
			□ Change

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E Effortis	a data if other tha	s tha data of fil	linas		(0	ntional)	
(If an effective	e date, if other than	te must be specific	and cannot be prior	r to date of filing or	more than 90 days a	after filing.) Pursuant t	o 605.02
	f the date inserted in t nt's effective date on				ng requirements,	this gate will not be	; nstęd
	ord specifies a del 90th day after the			ot an effective	time, at 12:0	1 a.m. on the e	arlier
		record is file	·u.	<i></i>	7		
Dated _	uly 24		2015			72	-
)//					,
		<u> </u>	· ·		o of a mamban		_ <u>`</u> _
		Signature of	i a menader or auth	orized representati	e or a member		28
	Bobbie Gilbert						*

Page 3 of 3

Filing Fee: \$25.00