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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Eiling Officer | |
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SEURE FARY OF STATE
ALLAHASSEE, FLORID.

B. BOSTICK

DEC 21 2010

EXAMINER

COVER LETTER

| Division of Co. | rporations | | | | |
|---------------------------------|----------------------------------|--|---------------------------------|--------------------|----|
| SUBJECT: C | COLONIAL TOWN C | ENTER OF ORLANDO LI | _C | | |
| | | ited Liability Company | | | |
| | | | | | |
| | | | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | |
| Please return all correspondent | ondence concerning this matter | to the following: | | | |
| | | | | | |
| | HAR | ESH KARAMCHANDANI | | | |
| | | Name of Person | | | |
| | | | | | |
| | | Firm/Company | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| | 110 | 66 ULLSWATER LANE | | | |
| | | Address | | | |
| | 10/14 | NDEDLIEDE EL 04300 | | | |
| | Wif | NDERMERE, FL 34786 | | | |
| | | City/State and Zip Code | TA S | | |
| | | harrykaye@aol.com | <u>[</u> 5 | 0 | |
| | E-mail address: (1 | to be used for future annual report notification | a) £2 | E T | |
| For further information of | concerning this matter, please c | all: | ASS | FILED DEC 21 AM | |
| | | | iu,⊂ iu,~∠ | - III | |
| | KARAMCHANDANI | at (_407_) 927 | <u>7-7470</u> | | |
| Name o | f Person | Area Code & Daytime Tel | ephone Number | 1:5 | |
| | | Area Code & Daytime Tel | IDA IDA | 9 | |
| Enclosed is a check for the | he following amount: | | - | | |
| \$25.00 Filing Fee | ▼ \$30.00 Filing Fee & | \$55.00 Filing Fee & | \$60.00 Filing F | ee, | |
| _ | Certificate of Status | Certified Copy | Certificate of | Status & | |
| | | (additional copy is enclosed) | Certified Cop (additional co | | d) |
| | | | (auditivitat vo | P) is cholose | • |

MAILING ADDRESS:

TO:

Registration Section

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| COLONIAL TOWN CENTE | ER OF ORLA | NDO LLC | |
|---|---|------------------------|-----------------------|
| (Name of the Limited Liability Company (A Florida Limited Lia | y as it now appears ibility Company) | on our records.) | |
| The Articles of Organization for this Limited Liability Company w | vere filed on | 12/14/2010 | _ and assigned |
| Florida document number L-1998127597 | | | |
| Florida document number | | | |
| This amendment is submitted to amend the following: | | | |
| A. If amending name, <u>enter the new name of the limited liabil</u> | ity company here: | | |
| TMOBILE WEST | SIDE LLC | | • |
| The new name must be distinguishable and end with the words "Limite L.L.C." | d Liability Company | ," the designation "LL | C" or the abbreviatio |
| Enter new principal offices address, if applicable: | | | |
| Principal office address MUST BE A STREET ADDRESS) | | TAL | · . |
| | | L A | P |
| | | ASS | 2 |
| Enter new mailing address, if applicable: | | 33. | <u>*</u> |
| Mailing address MAY BE A POST OFFICE BOX) | | 7.0 | |
| | | LORID | |
| | | | 9 |
| 3. If amending the registered agent and/or registered office address here: | ce address on our | r records, enter the | name of the nev |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Enter | Florida street addres | ss . |

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 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

| MGR = M MGRM = | fanager Managing Member | | |
|-------------------|----------------------------|---|----------------|
| <u>Title</u> | <u>Name</u> | Address | Type of Action |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | eter change(s) here: (Attach additional sheets, if necessary.) FECTIVE DATE TO BE CHANGED TO 1/1/2011 | <u> </u> |
| | | ALLAHASSÉ |)EC 21 |
| Dated | DEC 18, | FLORIDA , 2010 | = 514TE |
| | Signature of HARESH KARA | f a member or authorized representative of a member | |
| | LITTE THE ANTRY | Typed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00