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## **COVER LETTER**

Division of Corporations	
SUBJECT: ColoConsortio LLC	
	d Liability Company)
The enclosed member, managing member or managing.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning th	is matter to:
Henry Villanueva	
(Contact Person)	<del></del>
ColoConsortio LLC	
(Firm/Company)	
9333 Hidden Water Circle	
(Address)	
Riverview FL, 33578	
(City/State and Zip Code)	
For further information concerning this matter,	please call:
Henry Villanueva	, 813 <sub>)</sub> 744-5146
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to t	he Florida Denartment of State for:
\$25 Filing Fee	\$55 Filing Fee &
<b></b>	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

CR2E079 (5/06)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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(Name of the Limited	COLOCONS Liability Compa Florida Limited	ORTIO LLC iny as It now appear Liability Company)	s on our records.)	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
The Articles of Organization for this Limited L Florida document numberL1100002	• •	were filed onF	February 23, 201	and assigned	
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	ility company her	<u>e</u> :		
The new name must be distinguishable and end with "L.L.C."	th the words "Lim	ited Liability Compa	ny," the designation "l	LC" or the abbreviation	
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:		9333 Hidden Water Circle			
		Riverview FL, 33578			
		9333 Hidden Water Circle			
( <u>Mailing address MAY BE A POST OFFICE BOX)</u>		Riverview FL, 33578			
B. If amending the registered agent and/or the new registered of	fice address her	<u>e</u> :	ur records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:	Henry Villanueva				
New Registered Office Address:	9333 Hidden Water Circle  Enter Florida street address				
	_		er 1 ioriaa sireel aaa.		
		Riverview City	, Florida	33578 Zip Code	
New Degistered Agent's Signature if changing D	enistared Agents	•		zip Code	

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.

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Mario L Galvez	3021 Sutton Woods Drive Plant City, FL 33566	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	g any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	
			<del>-</del>
			-
Dated	November 4		
<del></del>	Signature of a member of	authorized representative of a member	<del>1 . 1/</del>
	HENRY	VILANUEJA printed name of signee	<del></del>

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Filing Fee: \$25.00