

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L15000213688

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H1600002378 3))



H16000023783ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : BRENNAN, MANNA & DIAMOND, P.L.L.C.
Account Number : I20040000104
Phone : (904) 366-1500
Fax Number : (904) 366-1501

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THE AKAMAI OPTION LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

RECEIVED
2016 JAN -5 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 06 2016
J. HARRIS

H16000002378 3

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Akamai Option, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher A. Walker

Name of Person

Brennan, Manna & Diamond, P.L.

Firm/Company

800 West Monroe Street

Address

Jacksonville, Florida 32202

City/State and Zip Code

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

For further information concerning this matter, please call:

Christopher A. Walker

904 366-1500
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ ~~\$30.00 Filing Fee &~~
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

H16000002378 3

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H16000002378 3

The Akamai Option LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on December 29, 2015 and assigned
Florida document number L15000213688

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2157 Roswell Road NE

Marietta, Georgia 30064

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2157 Roswell Road NE

Marietta, Georgia 30064

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, Florida _____
City 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 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:

H16000002378 3

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
CEO	Jamaal Deen	2157 Roswell Rd NE	<input checked="" type="checkbox"/> Add
		Marietta, Georgia 30064	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
CAO	Coral N. Greenlee	2157 Roswell Rd NE	<input type="checkbox"/> Add
		Marietta, Georgia 30064	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
COO	Lorenzo D. Mitchell	2157 Roswell Rd NE	<input type="checkbox"/> Add
		Marietta, Georgia 30064	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)* H16000002378 3

E. 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.) Pursuant to 605.0207 (3)(b)

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.

(b) The 90th day after the record is filed.

Dated _____ January 5 2015

Cliff Walker

Signature of a member or authorized representative of a member

Christopher A. Walker, Authorized Representative

Typed or printed name of signee

2016 JAN -5 AM 9:12
SALT LAKE CITY, UT
SALT LAKE CITY, UT