

From:

10/20/2016 10:02

#675 P.001/005

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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : ALLEN DELL, P.A.  
Account Number : I20040000136  
Phone : (813)223-5351  
Fax Number : (813)229-6682

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

jruigg@allendell.com

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COLLISGATE COMMUNICATIONS GROUP, LLC

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From:

10/20/2016 10:02

#675 P.002/005

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**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: COLLISGATE COMMUNICATIONS GROUP, 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:

JOSEPH RUGG  
Name of Person

---

ALLEN DELL, P.A.  
Firm/Company

---

202 SOUTH ROME AVENUE, SUITE 100  
Address

---

TAMPA, FL 33606  
City/State and Zip Code

---

jrugg@allendell.com  
E-mail address: (to be used for future annual report notification)

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 TALLAHASSEE, FLORIDA  
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For further information concerning this matter, please call:

JOSEPH RUGG at ( 813 ) 769-3941  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee  
VIA SUNBIZ ACCOUNT
- \$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

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

(((H16000259562 3)))

COLLISGATE COMMUNICATIONS GROUP, 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 10/17/2016 and assigned Florida document number L16000191588.

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)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

\_\_\_\_\_  
\_\_\_\_\_

**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

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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>	<u>Type of Action</u>
MGR	HANNA M. GULLLANO	202 S ROME AVE, STE 100	<input type="checkbox"/> Add
		ATT: JOE RUGG	<input checked="" type="checkbox"/> Remove
		TAMPA, FL 33606	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	HANNA M. GIULIANO	202 S. ROME AVE., STE 100	<input checked="" type="checkbox"/> Add
		ATT: JOE RUGG	<input type="checkbox"/> Remove
		TAMPA, FL 33606	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

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