CT CORPORATION

CORPORATION(S) NAME

M01000000001

Ft. Myers/Gateway, LLC		
Changed Name to: Adelphia	Pinellas County, LLC	
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		FILED FILED SECRETARY OF STATE SECRETARY OF STATE OR TO STATE SECRETARY OF STATE OR TO STA
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() Profit	(X) Amendment	() Merger
() Nonprofit		<u>= 2 7</u>
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark () Other () Change of RACOT () UCC
() Limited Partnership	() Annual Report	() Other
()LLC	() Name Registration	() Change of RA
() () (° 10	() Fictitious Name	() UCC 与表点 T () CUS 岩岩 C
() Certified Copy	() Photocopies	2t 2t
() Call When Ready	() Call If Problem	() After 4:30
(x) Walk In	() Will Wait	(x) Pick Up
() Mail Out		
Name	3/4/02	Order#: 5128230
Availability	51.47.02	2000050413820
Document		-03/04/0201069020 *****25.00 *****25.00
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Verifier	•	- · · · · · · · · · · · · · · · · · · ·
W.P. Verifier		Amount: \$
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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

1.	Name of limited liability company as it appears on the records of the Florida Department of State:	
2.	. Jurisdiction of its organization:	¥
3.	. Date authorized to do business in Florida: April 9, 2001	e
	SECTION II (4-7 complete only the applicable changes)	
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? February 27, 2002,	<u>ئ</u> ن
5.	. New name of the limited liability company: Adelphia Pinellas County, LLC ARE SEL	
6.	. If the amendment changes the period of duration, indicate new period of duration:	
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction:	. Transfell
9.	Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized. Signature of a member or the authorized representative of a member	en e
	Colin H. Higgin Typed or printed name of signee	

Filing Fee: \$25.00

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "FT. MYERS/GATEWAY, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "ADELPHIA PINELLAS COUNTY, LLC", THE TWENTY-SEVENTH DAY OF FEBRUARY, A.D. 2002, AT 4:30 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

02 MAR -4 PM 3: 08
SECRETARY OF STATE
TALL ANASSEE FLORIDA



Harriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1639142

DATE: 02-28-02

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