900000303 Division of C Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

**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 REGISTERED AGENT CHANGE LEVEL 3 EON, LLC

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T. HAMPTON

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CI CORPORATION

COVER LETTER

<u> </u>	- · · · - · · · · · · · · · · · · ·
TO: Registration Section Division of Corporations	
SUBJECT: LEVEL 3 BON, LLC	
Name of Li	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing
Please return all correspondence concerning t	his matter to the following:
Name of Person	<u></u>
Mande At T Mank	
Firm/Company	
Constituting	
Address	
• • • • • • • • • • • • • • • • • • • •	
City/State and Zip Code	
Micke.Schierer@Level3.com	
B-mail address: (to be used for future annual report not	fication)
For further information concerning this matter	, please call:
	· · · · · · · · · · · · · · · · · · ·
Name of Person	at (
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327 Tallahassee, Florida 32314
2661 Executive Center Circle Tallahassec, Florida 32301	Taitetmoore ¹ v.ruthb 745 14
Enclosed is a check for the following	amount:
□ \$25 Filing Fee	S55 Filing Fee & Cartified Copy
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CT CORPORATION

02/10/2015 13:52 8626336092

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

state of Florida,	order to change its registered office and lin	mitea
1. Name of the limited liability company: LEVEL 3 EO	N. LLC	tared
2. (a) Principal office address of limited liability comp	Anu	
(Note: MUST BE STREET ADDRESS)	1025 ELDORADO BLVD	
(b) Mailing address of limited liability company:	BROOMFIELD CO 80021	
(Note: MAY BE POST OFFICE BOX)	1025 ELDORADO BLVD.	
8/6/2009	BROOMFIELD CO 80021 M0900003039	
3. Date of filing/registration in Florida	4. Document number	_
5. (a) Registered Agent and Registered Office shown o	the records of the Morida Dent, of States	
Registered Agent:	CORPORATION SERVICE COMPANY	
Registered Office Address:	1201 HAYS STREET	_
	TALLAHASSEE FL 32301-2525	
(b) Enter name of NEW Registered Agent and/or NI	W Doristavad Office addresses	-
NEW Registered Agent:	CT Corporation System	
· ·	1200 South Pine Island Road	- -
NEW Registered Office Address: (MUST BE PLORIDA STREET ADDRESS)		
If the limited liability company is not organized under the	Plantation FL 33324 laws of the State of Florida, it is hereby	
confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is bereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registered office rical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote frwise provided in the articles of organization	3
Signature of a member or authorized representative of a member	•	
Jaimie Voss, Malager Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p and I am familiar with and accept the obligations of my p Chapter 608, F.S. Or, if this accument is being filed to m address, I hereby confirm that the limited (applied Society Corporation System)	ostiion as registered agent as provided for in erety reflect a change in the registered office was been notified in writing of this change.	DIVIS
By: Signature of Registered Agent Agent Section Signature of Registered Agent	- Limit	SEC
Division of Corporations, P.O. Box 6 FILING FEE:	327, Tallahassee, FL 32314	RETAIN OF TA
INHS18 (05/08)	A	(40) (41)
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