

M1000004036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

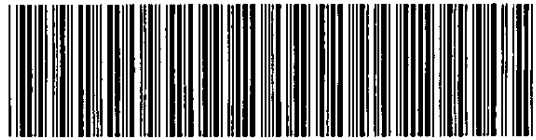
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 NOV 16 AM 10:54
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FILED
15 NOV 16 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 17 2015

J SHIVERS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 872318 4355598
AUTHORIZATION : *Spuddean*
COST LIMIT : \$ 25.00

ORDER DATE : November 13, 2015
ORDER TIME : 9:23 AM
ORDER NO. : 872318-050
CUSTOMER NO: 4355598

FOREIGN FILINGS

NAME: COMCAST SUPPORT SERVICES, LLC

CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY 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: Comcast Support Services, LLC

2. Jurisdiction of its organization: Delaware

3. Date authorized to do business in Florida: 9/13/2010

SECTION II (4-7 complete only the applicable changes)

4. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

6. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change: The LLC is now manager managed, and its manager is Comcast Cable Communications Management, LLC.

7. Attached is an original certificate, if required: 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.

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Arthur R. Block
Signature of the authorized representative

Arthur R. Block, Executive VP of Manager

Typed or printed name of signee

Filing Fee: \$25.00