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J. SAULSBERRY **EXAMINER** Help APR 12 2013

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BLISINESS IN THE STATE OF FLORIDA:

1. Zayo Professional Services, LLC			- W - A B
(Name of Foreign Limited Liability	y Company; must include	"Limited Liability Company," "L.L.C	2.," or "LLC.")
(If name unevailable, enter alternate name consent of the managers or managing mem Company," "L.L.C," "LLC.")	nbers adopting the altern	ate name. The allemate name must inc	attach a copy of the written lude "Limited Liabitity
2. Delaware	3.	80-0846567	
(Jurisdiction under the law of which for company is organized)	eign limited liability	(FEI number, if applica	ible)
4. 8-31-2012	5,	Perpetual	
(Date of Organization)		(Duration: Year limited liability con exist or "perpetual")	npany will cease to
6			2013 94 7ALL
(Date first tra (See sections 6)	insacted business in Flor 08.501 & 608.502 F.S. t	da, if prior to registration.) o determine penalty liability)	
7. 400 Centennial Parkway, Sulte 200			
Louisville, CO 80027			
	(Street Address o	Principal Office)	
8. If limited liability company is a	manager-managed c	ompany, check here 🔀	8: 22 M/E 99(g)
9. The name and usual business ad	dresses of the manag	ging members or managers are a	s follows:
Daniel Caruso 400 Centennial Parkwa	ay, Suite 200 Louisville,	CO 80027	
Scott Beer 400 Centennial Parkway, S	Suite 200 Louisville, CO	80027	
Ken desGarennes 400 Centennial Pari	kway, Suite 200 Louisvi	lle, CO 80027	
10. Attached is an original certificate of exist the jurisdiction under the law of which it is a translation of the certificate under outh of the law or purposes 11. Nature of business or purposes	organized. (A photocopy e translator must be subm	is not acceptable. If the certificate is in itted.)	
	13C		<u></u> •
	* •	orized representative of a memb	
ponalties of perjury that the i	facts stated herein are true.	on of this document constitutes an affirma I arm aware that any false information : third degree felony as provided for in :	submitted in a
Ken desGarenn	.05		

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

CT Corporation System (Name) 1200 South Pine Island Road Plorida Street Address (P.O. Box NOT ACCEPTABLE) Plantation FL City/State/Zip Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and inccept the obligations of my position as registered agent as provided for in Chapter 608, Florida	If unavailable, the alternate to be used in the state of Florida is: 2. The name and the Florida street address of the registered agent and office are:							
1200 South Fine Island Road 1200 South File Island Road 1200 South Fine Island Road 1200 South Fine Island Road 1200 South File Island Road 1200								
Plantation FL 33324 Plantation FL 33324 City/State/Zip City/State/Zip Having been named as registered agent and to accept service of process for the above stated limited itability company at the place designated in this centificate, 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 relating 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 608, Florida Statutes. CT Corporation System Hiedl M. Lesch Assistant Secretary By: \$100.00 Filing Fee for Application \$25.00 Designation of Registered Agent		(C T Corporation System					
Plantation Plantation FL 33324 City/State/Zip City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/St			(Name)	一				
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City/State/Zip City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/City/State/		Florida Street Address (P.O. Box NOT ACCEPTABLE)		R I				
Cliy/State/Zip Company at the above stated limited Appointment as registered agent as provide for the appointment as registered agent as provided for in Chapter 608, Florida clip Clip/Clip/Clip/Clip/Clip/Clip/Clip/Clip/		Planistion	13324	era				
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\$ 25.00 Designation of Registered Agent		- PY:F7(10 B) 7111 (7)						
			- ,					
\$ 5.00 Certificate of Status (optional)		\$ 100.0	00 Filing Fee for Application					

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ZAYO PROFESSIONAL SERVICES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF APRIL, A.D. 2013.

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

2013 APR 11 AM 8: 22
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You may verify this certificate onlin

Jolfrey W. Bullock, Secretary of State

DATE: 04-08-13