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

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TW TELECOM HOLDINGS II LLC

Certificate of Status	0
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Page Count	05
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Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	on the records of the	e Florida Departm	ent of
State: tw telecom holdings Il Ilc			
Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OF FICE BOX)			
2. The Florida document number of this limited liab	aility company is:	M98000001	196
2. The Horida document number of this immed made	onny company is:		-
3. Jurisdiction of its organization: Delawa	are		 က——
4. Date authorized to do business in Florida: 10/15	/98	· · · · · · · · · · · · · · · · · · ·	2
SECTION II (5-9 complete only the applicable cl	hanges)		
5. New name of the limited liability company: Lev (must	vel 3 Telecom Holdin contain "Limited Li	gs II, LLC ability Company.	""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or manual contain "Limited Liability Company," "L.L.C.	aging members adon	nnsacting business ting the alternate	in Florida and attach a name. The alternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office ade	l officer address on d dress here:	our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:		_	
	En	ter Florida Street	Address
-		, Fl	orida
	City		Zip Code
New Registered Agent's Signature, if changing Reg I hereby accept the appaintment as registered agenthe provisions of all statutes relative to the proper a and accept the obligations of my position as registed document is being filed to merely reflect a change in liability company has been notified in writing of this	t and agree to act in and complete perform red agent as provide n the registered office	nance of my dutie ed for in Chapter (s, and I am familiar with — 605, F.S. Or, if this
If Ch	anging Registered A	gent, Signature of	f New Registered Agent

2/25/2016 3:05:51 PM From: To: 8506176383(3/5)

If the amendment c	hanges person, title or capacity in a	accordance with 605.0902 (1)(e), indic	ate that change:
itle/ Capacity	Name	Address	Type of Action
			Add
			Remov
		·	6 FE 25
			Remove
			Add
			Remove
	·		Add
			Remove
forementioned ame	eate, if required: no more than 90 andment(s), duly authenticated by a law of which this entity is organ	the official having custody of record	s in the
	//Signature of	the authorized representative	

Filing Fee: \$25.00

Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF AMENDMENT OF "TW TELECOM HOLDINGS II

LLC", CHANGING ITS NAME FROM "TW TELECOM HOLDINGS II LLC" TO

"LEVEL 3 TELECOM HOLDINGS II, LLC", FILED IN THIS OFFICE ON THE

FIRST DAY OF FEBRUARY, A.D. 2016, AT 11:41 O'CLOCK A.M.



Juliny N. Dullées, Socretary of Slafe

Authentication: 201763957

Date: 02-02-16

2/25/2016 3:05:51 PM From: To: 8506176383(5/5)

State of Delaware
Secretary of State
Division of Corporations
Delivered 11:41 AM 02/01/2016
FILED 11:41 AM 02/01/2016
SR 20160496287 - File Number 2919264

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

as follows: The name of the life	imited liability company is Level 3 Telecom Holdings II, LLC.	
	·	
		ſ
	WHEREOF, the undersigned have executed this Certificate	on =
	WHEREOF, the undersigned have executed this Certificate day of February , A.D. 2016 .	on 16 FE
		6 FEB
	day of February , A.D. 2016	6 FEB 25
N WITNESS V		6 FEB

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