


1062

# LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M01000002512

1. Entity Name  
*Cellular One L.L.C.*



**FILED**  
**Jun 14, 2003 8:00 A.M**  
**Secretary of State**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <i>3650 131st Avenue SE</i>	3. Mailing Address <i>3650 131st Avenue SE</i>
Suite, Apt. #, etc. <i>Suite 400</i>	Suite, Apt. #, etc. <i>Suite 400</i>

DO NOT WRITE IN THIS SPACE

City & State <i>Bellevue, WA</i>	City & State <i>Bellevue, WA</i>
Zip <i>98006</i>	Country <i>USA</i>
Country <i>USA</i>	Zip <i>98006</i>

4. FEI Number <i>91-2134571</i>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name *Corporation Service Company*

Street Address (P.O. Box Number is Not Acceptable)  
*1201 Hays Street*

City *Tallahassee* FL Zip Code *32301*

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE *06/17/03*

*200020901302*  
*06/17/03--01010--003 \*\*50.00*

**FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**DUE BY MAY 1**

9. MANAGING MEMBERS / MANAGERS		TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
<i>See attached list</i>					
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<b>DO NOT WRITE IN THIS SPACE</b>	
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP		
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP		
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP		
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP		
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP		

CR2E083B (12/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* Date *6/6/03* Daytime Phone # *(425) 586-8700*

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**Cellular One L.L.C.**

John W. Stanton  
Manager

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Bellevue, WA 98006

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Manager

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Thorpe "Chip" Kelly  
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Eric Scott Baker  
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