File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. EILED SECRETARY OF STATE DIVISION OF CORPORATIONS LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE **Katherine Harris** ANNUAL REPORT Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 MAY 17 PH 2: 32 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # M98000001186** 1a. Principal Place of Business Address TIME WARNER TELECOM HOLDINGS II LLC 5700 SOUTH QUEBEC STREET 5700 SOUTH QUEBEC STREET GREENWOOD VILLAGE CO 80111 GREENWOOD VILLAGE CO 80111 2a. Mailing Address 2 Principal Place of Business 3. Date Organized or Qualified 3a. State of Formation COTWC TAX 10/15/1998 DE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number P.O. BOX 6659 Applied For City & State City & State 84-1465464 Not Applicable ENDIEWOOD CO 5. Date of Last Report 6. Certificate of Status Desired \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent/Office C T CORFORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) FLANTATION FL 33324 Suite, Apt. #, etc. 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when remaining) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM TIME WARNER TELECOM , 5700 SOUTH QUEBEC STREET GREENWOOD VILLAGE CO 240002887922---05/27/99--01009--021 \*\*\*\*188.75 \*\*\*\*188.75 11. I do 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 annual 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, and that my name appears in Block 10, or on an attachment with an address.

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