## 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001676

Entity Name: COX BUSINESS SERVICES, L.L.C.

**Current Principal Place of Business:** 

1400 LAKE HEARN DRIVE ATLANTA GA 30319

**Current Mailing Address:** 

1400 LAKE HEARN DRIVE MAILSTOP CP-12 / ATTN:CORP TAX DEPT

ATLANTA GA 30319

FEI Number: 58-2584769 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title VΡ Title **MGRM** 

Name CBS LLC MANAGEMENT, INC Name VICKERS, MARY

Address 6205 PEACHTREE DUNWOODY RD Address 6205 PEACHTREE DUNWOODY ROAD

ATLANTA GA 30328 City-State-Zip: City-State-Zip: ATLANTA GA 30328

Title

Title ESSER, PATRICK J Name

Name MUHL. SHAUNA S Address 6205 PEACHTREE DUNWOODY ROAD

Address 6205 PEACHTREE DUNWOODY ROAD

City-State-Zip: ATLANTA GA 30328 City-State-Zip: ATLANTA GA 30328

TREASURER, VP Title

Name DECKER, KATHERINE K 1400 LAKE HEARN DRIVE Address City-State-Zip: ATLANTA GA 30319

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARY VICKERS

Electronic Signature of Signing Authorized Person(s) Detail

VP - TAX

S

04/14/2014 Date

**FILED** Apr 14, 2014

**Secretary of State** 

CC1171805971

Date