

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000005045

**Entity Name:** COX WIRELESS, LLC

**Current Principal Place of Business:**

6205 PEACHTREE DUNWOODY ROAD  
ATLANTA, GA 30328

**Current Mailing Address:**

6205-A PEACHTREE DUNWOODY ROAD  
ATLANTA, GA 30328 US

**FEI Number:** 26-3246030

**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

Date

**Authorized Person(s) Detail :**

Title	VICE PRESIDENT	Title	MANAGER, PRESIDENT
Name	SIEGEL, REBECCA L.	Name	GREATREX, MARK J.
Address	6205 PEACHTREE DUNWOODY ROAD	Address	6205 PEACHTREE DUNWOODY ROAD
City-State-Zip:	ATLANTA GA 30328	City-State-Zip:	ATLANTA GA 30328
Title	MANAGER, SECRETARY	Title	MANAGER, VICE PRESIDENT
Name	HIGHTOWER, JENNIFER	Name	MCBRIDE, R. PERLEY
Address	6205 PEACHTREE DUNWOODY ROAD	Address	6205 PEACHTREE DUNWOODY ROAD
City-State-Zip:	ATLANTA GA 30328	City-State-Zip:	ATLANTA GA 30328
Title	MEMBER	Title	VICE PRESIDENT, TREASURER
Name	COXCOM, LLC	Name	FRIEDMAN, MARIA L.
Address	6205 PEACHTREE DUNWOODY ROAD	Address	6205 PEACHTREE DUNWOODY ROAD
City-State-Zip:	ATLANTA GA 30328	City-State-Zip:	ATLANTA GA 30328
Title	ASSISTANT SECRETARY		
Name	AVILA, LUIS A.		
Address	6205 PEACHTREE DUNWOODY ROAD		
City-State-Zip:	ATLANTA GA 30328		

*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:** LUIS A. AVILA

**ASSISTANT SECRETARY** 04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date