I hereby certify that the information indicated on this report or supplemental report is true and accurate and oath; that I am a managing member or manager of the limited liability company or the receiver or trustee en that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE: KAREN M. DIORIO	AUTHORIZED SIGNER	04/23/2023

SIGNATURE: KAREN M. DIORIO

Electronic Signature of Signing Authorized Person(s) Detail

#### DOCUMENT# M13000007520

Entity Name: NCWPCS MPL 24 - YEAR SITES TOWER HOLDINGS LLC

#### **Current Principal Place of Business:**

1025 LENOX PARK BLVD NE ATLANTA GA 30319

## **Current Mailing Address:**

1025 LENOX PARK BLVD NE ATLANTA GA 30319 US

#### FEI Number: 46-4582782

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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	MANAGER	Title	MANAGER
Name	HARRISON, GREGORY S	Name	SHIPPAM, C ANTHONY
Address	s 1025 LENOX PARK BLVD NE	Address	1025 LENOX PARK BLVD NE
City-Sta	ate-Zip: ATLANTA GA 30319	City-State-Zip:	ATLANTA GA 30319
Title	AUTHORIZED SIGNER	Title	MANAGER
Title Name	AUTHORIZED SIGNER DIORIO, KAREN M.	Title Name	MANAGER AT&T MOBILITY CORPORATION
	DIORIO, KAREN M.		
Name	DIORIO, KAREN M. s 1025 LENOX PARK BLVD NE	Name	AT&T MOBILITY CORPORATION

Date

# FILED Apr 23, 2023 Secretary of State 3567170450CC

Date

Certificate of Status Desired: No