

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000001079

**FILED**  
**Apr 24, 2018**  
**Secretary of State**  
**CC7909366281**

**Entity Name:** CCI CORPORATE SERVICES, LLC

**Current Principal Place of Business:**

6205-B PEACHTREE DUNWOODY RD  
ATLANTA, GA 30328

**Current Mailing Address:**

6205-B PEACHTREE DUNWOODY RD  
ATLANTA, GA 30328

**FEI Number:** 26-3564488

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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 VP  
Name HIGHTOWER, JENNIFER  
Address 6205-B PEACHTREE DUNWOODY RD  
City-State-Zip: ATLANTA GA 30328

Title AUTHORIZED MEMBER  
Name COX COMMUNICATIONS, INC.  
Address 6205-B PEACHTREE DUNWOODY RD  
City-State-Zip: ATLANTA GA 30328

Title VP  
Name VICKERS, MARY  
Address 6205-B PEACHTREE DUNWOODY RD  
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:** MARY VICKERS

**VICE PRESIDENT**

**04/24/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date