

**2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000007265

**Entity Name:** VERO FIBER NETWORKS, LLC

**FILED**  
**Jan 06, 2020**  
**Secretary of State**  
**6896644420CC**

**Current Principal Place of Business:**

GALVANIZE ATTN: VERO NETWORKS  
1023 WALNUT ST STE. 100  
BOULDER, CO 80302

**Current Mailing Address:**

PO BOX 1110  
BOULDER, CO 80306 US

**FEI Number: 82-2606100**

**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 MGR  
Name FRIEDMAN, GREG  
Address PO BOX 773811  
City-State-Zip: STEAMBOAT SPRINGS CO 80477

Title MGR  
Name ERICKSON, MATT  
Address 950 GILBERT ST  
City-State-Zip: BOULDER CO 80302

Title MGR  
Name NEBERGALL, ZACH  
Address 1133 MAPLETON AVE  
City-State-Zip: BOULDER CO 80304

Title MGR  
Name STRUMBARGER, GREGG  
Address 16571 JUPITER WAY  
City-State-Zip: BROOMFIELD CO 80023

Title MGR  
Name REAL, JOHN  
Address 11885 OSCEOLA ST  
City-State-Zip: WESTMINSTER CO 80031

Title MGR  
Name JONES, DAVID  
Address 5780 AMBER RIDGE DR  
City-State-Zip: CASTLE PINES CO 80108

Title MGR  
Name MURPHY, CHRIS  
Address 800 S GARFIELD  
City-State-Zip: DENVER CO 80209

*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: GREG FRIEDMAN**

**CFO**

**01/06/2020**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date