

M01000000409

1 of 2

LIMITED LIABILITY
COMPANY



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 OCT 29 PM 1:47

REINSTATEMENT

2002

DIVISION OF CORPORATIONS

DOCUMENT # M01000000409

1. Limited Liability Company's Name

CINGULAR WIRELESS LLC

10/29

2. Principal Office Address

5565 Glenridge Connector

Suite, Apt. #, etc.

City & State

Atlanta, GA

Zip
30342

Country
USA

3. Mailing Office Address

5565 Glenridge Connector

Suite, Apt. #, etc.

Suite 1700

City & State

Atlanta, GA

Zip
30342

Country
USA

4. State/Country of Formation

DELAWARE / USA

5. Date Organized or Qualified
To Do Business in Florida

2/22/01

6. FEI Number

74-2955068

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 HAYS STREET

Suite, Apt. #, Etc.

City

TALLAHASSEE

State

FL

Zip Code

32301

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Brian Courtney

Date

10-29-02

REGISTERED AGENT Asst. V Pres.

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	CINGULAR WIRELESS CORPORATION / FKA	5565 Glenridge Connector	Atlanta, GA 30342
	CINGULAR WIRELESS MANAGEMENT CORP.		800008673919

REINSTATEMENT

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11. I certify that I am managing member/ manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

Amy Lynne Keith

Date

10/28/02

Daytime Phone #

404-236-5555

Typed or printed name of signing Managing Member/Manager

AMY KEITH, ASST SEC

CR2E041 (9/01)



ACCOUNT NO. : 072100000032

REFERENCE : 798985 4386365

AUTHORIZATION :

COST LIMIT : \$ 750.00

Patricia Pizute

ORDER DATE : October 29, 2002

ORDER TIME : 10:48 AM

ORDER NO. : 798985-005

CUSTOMER NO: 4386365

CUSTOMER: Ms. Kathy Kenny
Cingular Wireless
5565 Glenridge Connector
Suite 1700
Atlanta, GA 30342

REINSTATEMENT

NAME: CINGULAR WIRELESS LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Heather Powell

EXAMINER'S INITIALS _____