

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91004 006 \*\*\*\*\*50.00

DOCUMENT # M02000000190

1. Entity Name

Telerep, L.L.C.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

6205 Peachtree Dunwoody Rd.

Suite, Apt. #, etc.

3. Mailing Address

6205 Peachtree Dunwoody Rd.

Suite, Apt. #, etc.

Attn: Corp Tax Dept. - 12th Flr

DO NOT WRITE IN THIS SPACE

City & State  
Atlanta, GA

City & State  
Atlanta, GA

4. FEI Number  
13-3614548

Applied For  
Not Applicable

Zip  
30328

Country  
USA

Zip  
30328

Country  
USA

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

**7. Name and Address of Current Registered Agent**

Name Corporation Service Company

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

1201 Hays Street

City Tallahassee

FL Zip Code  
32301

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FEE IS \$50.00**

**Make Check Payable to Florida Department of State  
DUE BY MAY 1**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

MGRM - Cox Salesrep, Inc.  
6205 Peachtree Dunwoody Rd  
Atlanta, GA 30328

TITLE  
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

*Preston B. Barnett*

Preston B. Barnett

4/22/03

678-645-0000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/02)