

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

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90760 023 ****50.00

DOCUMENT # M02000003440

1. Entity Name

COMCAST PHONE, LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1500 MARKET ST

Suite, Apt. #, etc.

3. Mailing Address

1500 MARKET ST

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

PHILADELPHIA PA

Zip

19102-2148

Country

USA

City & State

PHILADELPHIA PA

Zip

19102-2148

Country

USA

4. FEI Number

84-1604822

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

C T CORPORATION SYSTEM

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

1200 SOUTH PINE ISLAND ROAD

City

PLANTATION

FL

Zip Code

33324

**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
COMCAST CABLE COMMUNICATIONS
HOLDINGS, INC.
1500 MARKET ST
PHILADELPHIA PA 19102-2148

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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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:

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

C. STEPHEN BACKSTROM

Date

Daytime Phone #

215-981-7557

CR2E083B (12/02)