2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000005618

1. Entity Name USOSC HOLDINGS, LLC



FILED Apr 03, 2008 08:00 Al Secretary of State

Principal Place of Business

Mailing Address

9405 ARROWPOINT BLVD. CHARLOTTE, NC 28273 9405 ARROWPOINT BLVD. CHARLOTTE, NC 28273



DO NOT WRITE IN THIS SPACE

03132008 No Chg-LLC

132008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 94-3282137

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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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

(NOTE Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 U00000879044 04/15/08-80003-024 138.75

9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME SIREEI ADDRESS CITY-ST-ZIP	MGRM U.S. OPERATING SERVICES HOLDINGS, LLC 9405 ARROWPOINT BLVD. CHARLOTTE, NC 28273	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes

SIGNATURE:

AGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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704-525-3800

Daytime Prione ≢

Thomas J. Bonner