2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M06000003114

1. Entity Name U.S. FIBER LLC



Principal Place of Business

809 WEST HILL STREET CHARLOTTE, NC 28208

Mailing Address

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

809 WEST HILL STREET CHARLOTTE, NC 28208

FILED Apr 03, 2007 8:00 am Secretary of State

04-03-2007 90119 041 ****50.00

60031660



03282007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	56-2026037

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

802 7750325

-6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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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	
Filing Fee is \$50.00 Due by May 1, 2007				
9.	. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FCR, LLC 809 WEST HILL STREET CHARLOTTE, NC 28208			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WR	ITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPA	CE	
NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
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 liability company or the receiver or to see empowered to execute this report as required by Chapter 608, Florida Statutes.				