

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # M07000000179

1. Entity Name  
PULSE TELECOM LLC



Principal Place of Business  
301 SOUTH 13TH STREET, STE 500  
LINCOLN, NE 68508

Mailing Address  
301 SOUTH 13TH STREET, STE 500  
LINCOLN, NE 68508

**FILED**  
**Aug 18, 2008 08:00 AM**  
**Secretary of State**



08052008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-5640097	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNOR'S SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 32301-2960

**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

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$538.75**  
**Due by September 12, 2008**

000000957864  
08/18/08-80006-008 538.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MALAI, MARIUS 301 SOUTH 13TH STREET, STE 500 LINCOLN, NE 68508
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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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_

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

Date

Daytime Phone #

JAY HATFIELD, AUTH MGR.

8/5/08

5023270055