2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# M07000000179

Entity Name: PULSE TELECOM LLC

Current Principal Place of Business:

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

New Principal Place of Business:

4969 US HWY 42
SUITE 2700
LOUISVILLE, KY 40222 US

Current Mailing Address:

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

New Mailing Address:

3100 CUMBERLAND BOULEVARD
SUITE 900
ATLANTA, GA 30339

FEI Number: 20-5640097 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

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.

SIGNATURE: ______________________________
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR ( ) Delete
Name:	MALAI, MARIUS
Address:	301 SOUTH 13TH STREET, STE 500
City-St-Zip:	LINCOLN, NE 68508
Title:	( ) Delete
Name:	
Address:	
City-St-Zip:	

ADDITIONS/CHANGES:

Title:	MGR (X) Change ( ) Addition
Name:	COSMIN, GHEARA
Address:	4969 US HWY 42, SUITE 2700
City-St-Zip:	LOUISVILLE, KY 40222 US
Title:	MGR ( ) Change (X) Addition
Name:	MALAI, MARIUS
Address:	4969 US HWY 42, SUITE 2700
City-St-Zip:	LOUISVILLE, KY 40222 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: SUSAN DUGGAN - ATTORNEY IN FACT AIF 04/22/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date