File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Katherine Harris ANNUAL REPORT FILED Secretary of State 1999 DIVISION OF CORPORATIONS 99 MAY - 3 PH 12: 55 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE TALLAHASSEE, EL CRIDA Name and Mailing Address of Limited Liability Company **DOCUMENT # M97000000248** 1a. Principal Place of Business Address UNITED SERVICES TELEPHONE, LLC 46782X XMXEXIXEXOPRIDEXXX XDXPXIIXAEX, X XSULKIXIXEX XIXOR6X X4X7X5X XMEXIXXOPXLEXXX XDRXIXXEX, X XSUXIXIEX XLX NASHVILLE TN 37211 NASHVILLE TN 37211 2 Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 5209 Linbar Drive 5209 Linbar Drive 05/05/1997 TNSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For <u>Suite 605</u> Suite 605 City & State City & State 62-1656182 Not Applicable Nashville, TN Nashville, TN 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 37211 Davidson 37211 Davidson 09/16/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office NRAI SERVICES, INC. 526 FAST PARK AVENUE Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 -05/41/33--01063--023 Suite, Apt. #, etc ****188.75 ****188.7 Zip Code City 9. Pursuant to the provisions of Sections 608 416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE DATE (Registered Agent Ascepting Appointment). (IAPT): Registered Agent significance panel when recently a 10. Title Managing Members/Managers **Business Street Address** City. State and Zip Code ACTOR XAMENTARCHANDEN XIMENTA XEXIXINDE JOSAN, L.L.C. MGRM NASHVILLE TN 5209 LINBAR DRIVE, ST. 60 BLESER, STEVE T 592 GRAYBURN'S FORD DRIVE MGRM CHARLOTTE NC MGRM HENRY, JOHN D 644 GOOD SPRINGS ROAD NASHVILLE TN 11. Ido 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 annual 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, and that my name appears in Block 10, or on an

A STATE A MATERIAL STREET, THE TRACE OF CORRESPONDED OF SERVICE OF

4/28/99 (615)833-4797

INHSE10 R (12-98)

attachment with an address

SIGNATURE: