## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # M98000001004 1. Entity Name

SIGNATURE: \_\_\_\_



678-645-0000

Cox Communications Pensacola, L.L.C.					30063039		
	DO NOT WRITI	E IN THIS	SPAC	E			
Principal Place of Business					-		
6205 Pe Suite, Apt	eachtree Dunwoody Rd.	6205 Peachtree Dunwoody Rd.  Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	li :	
adite, Api	<del>n</del> , etc.	Attn: Corp Ta	x Dept 1	2th Flr	DO NOT WRITE IN THIS SPACE		
City & State Atlanta, GA		City & State Atlanta, GA			4. FEI Number 58-2412417   Applied   Not Appl		
Zip 30328	Country USA	<sup>Zip</sup> 30328	Country USA		5. Certificate of Status Desired S5.00 Additional Fee Required		
	7 - 137				7. Name and Address of Current Registered Agent		
	DO NOT W	IDITE		Name Corpo	ration Service Company	]	
	·		ACF		s (P.O. Box Number is Not Acceptable)		
•	IN THIS SI	PACE			1201 Hays Street		
					ssee FL Zip Code 32301		
	e named entity submits this statement factors of registered agent.	for the purpose of changi	ng its registere	d office or registe	red agent, or both, in the State of Florida. I am familiar with, and ac	cept	
SIGNATURE	Signature, typed or printed name of registered ager	m and little if againship	·		DATE	_	
	Signature, typed or printed flame or registered ager	E applicable.	FEE IS	\$50.00	DATE	{	
	; 	Make Check P		rida Departme	nt of State		
9.	MANAGING MEMB	ERS/MANAGERS				Ť	
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NAME			NAME				
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CITY-SI-ZIP			CITY-S				
11. I hereby of indicated limited lie	certify that the information supplied wit on this report is true and accurate and	In this filing does not qual d that my signature shall l	ity for the exem have the same	ption stated in Se legal effect as if n	ction 119.07(3)(i), Florida Statutes. I further certify that the informat acte under oath; that I am a managing member or manager of the ter 608 Enrida Statules.	tion e	

Preston B. Barnett

YPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE