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LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED M99000001173 02 APR 26 PM 3: 41 **DOCUMENT#** Charter Cable, LLC 1. Entity Name SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 3. Mailing Address 12405 Powerscourt Drive 12405 Powerscourt Drive Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 43~1659860 Applied For City & State City & State St. Louis, MO St. Louis, MO Not Applicable Country USA Zip 6313<u>1</u> Country ^{Zip} 63131 \$5.00 Additional 5. Certificate of Status Desired USA Fee Required 7. Name and Address of Current Registered Agent LexisNexis Document Solutions, Inc. DO NOT WRITE O Box Number is Not Acceptable)
W. W. Kelley Rd. IN THIS SPACE Zin Coge 32.31.1 FL Tallahassee 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. SIGNATURE FEE(IS)\$50:00 Make Check Payable to Department of State DUE BY MAY 1 MANAGING MEMBERS/MANAGERS 9. (MGR) TITLE NAME Charter Communications, Inc. NAME STREET ADDRESS STREET ADDRESS 12405 Powerscourt Drive CITY-ST-ZIP CITY ST-ZIP <u>St. Louis, MO 63131</u> TITLE NAME

STREET ADDRES STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP NAME NAML 5 STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY ST-ZIP TITLE IN THIS SPACE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE : S NAME NAM STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

11. I 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 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.

NAME

TITLE (

STREET ADDRES

CITY-ST ZIP

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

Charter Communications, Inc. Marcy Lifton, V.P.

.Manager /2002

Daytime Phone #

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA 0,0000005
REFERENCE: 9602292-6 (Sub Account)
DATE: 4/2 6
REQUESTOR HAME: Lexis Document Services
ADDRESS: 2 7
ADDRESS: Z
TASSET 26 IV
TELEPHONE: () () oxt () TELEPHONE:
CONTACT NAME:
CORPORATION NAME: Charter Cable, LLC
OCUHENT NUMBER:
UTHORIZATION: Godin & Woodyard
CERTIFIED COPY (1-9) CERTIFICATE OF STATUS (1-9) PLAIN STAMPED COPY
) Call When Ready () Call if Problem () After 4:30) Walk In () Hill Halt () Pick Up