2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 24, 2023
Secretary of State
8971465474CC

DOCUMENT# M06000001710

Entity Name: PEAKNET SERVICES, LLC

Current Principal Place of Business:

526 S. CHURCH STREET
CHARLOTTE, NC 28202

Current Mailing Address:

525 S. TRYON STREET
CHARLOTTE, NC 28202 US

FEI Number: 20-4358439

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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

Authorized Person(s) Detail :

Title	SOLE MEMBER
Name	PT HOLDING COMPANY LLC
Address	526 S. CHURCH STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	COO
Name	CRANFORD, NATHAN
Address	400 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	PRESIDENT
Name	HATCHER, DAVID J.
Address	411 FAYETTEVILLE STREET
City-State-Zip:	RALEIGH NC 27601

Title	CHIEF ACCOUNTING OFFICER AND CONTROLLER
Name	LEE, CYNTHIA S.
Address	525 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	ASSISTANT TREASURER
Name	BAUER, CHRISTOPHER R.
Address	525 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	CHIEF STRATEGY OFFICER
Name	GRAVES, VAKESIA
Address	411 FAYETTEVILLE STREET
City-State-Zip:	RALEIGH NC 27601

Title	ASSISTANT TREASURER
Name	HENDERSHOTT, MICHAEL S.
Address	525 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	SECRETARY
Name	MALTZ, DAVID S.
Address	525 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Continues on page 2

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CASSANDRA M. SPRINGER ASSISTANT SECRETARY 04/24/2023

Electronic Signature of Signing Authorized Person(s) Detail — Date

Authorized Person(s) Detail Continued :

Title	VP, TAX
Name	MONROE, T. COOPER III
Address	525 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	ASSISTANT SECRETARY
Name	SPRINGER, CASSANDRA M.
Address	525 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202

Title	TREASURER
Name	NEWLIN, KARL W.
Address	525 S. TRYON STREET
City-State-Zip:	CHARLOTTE NC 28202