

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000008312

Entity Name: INTELEPEER NETWORKS, LLC**Current Principal Place of Business:**155 BOVET RD.
STE 405
SAN MATEO, CA 94402**Current Mailing Address:**2640 YOUREE DRIVE
STE 100
SHREVEPORT, LA 71104 US**FEI Number:** 85-2389532**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 | MBR |
| Name | INTELEPEER HOLDINGS, INC. |
| Address | 155 BOVET RD, STE 405 |
| City-State-Zip: | SAN MATEO CA 94402 |

| | |
|-----------------|-----------------------|
| Title | MGR,CEO |
| Name | FAUZI, FRANK |
| Address | 155 BOVET RD, STE 405 |
| City-State-Zip: | SAN MATEO CA 94402 |

| | |
|-----------------|-----------------------|
| Title | MGR,CFO |
| Name | SIMONE, ANDRE |
| Address | 155 BOVET RD, STE 405 |
| City-State-Zip: | SAN MATEO CA 94402 |

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: SCOTTY AMOS**AUTHORIZED PERSON****04/28/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date