No. <b>L 4768</b>		Due r	no later than Dec 31, 2015	2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE  Office Held Name		Annual Report Form  1. Mailing Address: Correct in this box if needed.  LIGHTSQUARED LP  AMY CRAWFORD  10802 PARKRIDGE BLVD  RESTON VA 20191  Street or PO Address		12550 W EX	CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
				3. New Registered Agent Signature:*				
GENERAL PARTNER		RED GP INC.	10802 PARKRIDGE BLVD	City RESTON	State VA	Country USA	Postal Code 20191	
5. Organized Under the Laws of:  DE L 4768		6. Annual Report must be signed.* Signature: Beth Creary Name (type or print): Beth Creary			e: 12/18/201 e: VP & Seci			
Processed 12/18/2015		* Electronically prov	ided signatures are accepted as origina	al signatures.				