No. <b>W 103962</b>		Due no later than Jun 30, 2015	2. Registered Age	Registered Agent and Address (NO PO BOX)     CORPORATION SERVICE COMPANY			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form	to accompany types in company and				
		1. Mailing Address: Correct in this box if needed.  MASTEC NETWORK SOLUTIONS, LLC  ERIN SHAUGHNESSY  ATTN: LEGAL DEPT  800 S DOUGLAS RD, PENTHOUSE  CORAL GABLES FL 33134	12550 W EXPLORER DR STE 100 BOISE ID 83713  3. New Registered Agent Signature:*				
		USA					
4. Limited Liability Compa	nies: Enter Nar	mes and Addresses of at least one Member or Manager.					
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
MEMBER	MASTEC, INC	C. 800 DOUGLAS RD 12TH FLOOR	CORAL GABLES	FL	USA	33134	
5. Organized Under the Laws of:		6. Annual Report must be signed.*					
FL.		Signature: Erin Shaughnessy	Date: 06/15/2015				
W 103962		Name (type or print): Erin Shaughnessy	Title: Licensing Analyst				
Processed 06/15/2015 * Electronically provided signatures are accepted as original signatures.							