

No. W 133903	Due no later than Feb 28, 2015 Annual Report Form		2. Registered Agent and Address (NO PO BOX)				
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	1. Mailing Address: Correct in this box if needed. AT&T MOBILITY SUPPLY, LLC 1025 LENOX PARK BLVD NE ATLANTA GA 30319 USA		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE 83705				
NO FILING FEE IF RECEIVED BY DUE DATE			3. <u>New</u> Registered Agent Signature:*				
4. Limited Liability Companies: Enter Names and Addresses of at least one Member or Manager.							
Office Held MANAGER	Name AT&T MOBILITY CORPORATION	Street or PO Address 1025 LENOX PARK BLVD NE	City ATLANTA	State GA	Country USA	Postal Code 30319	
5. Organized Under the Laws of: DE W 133903	6. Annual Report must be signed.* Signature: Kelly Lettmann Name (type or print): Kelly Lettmann						Date: 01/17/2015 Title: POA
Processed 01/17/2015	* Electronically provided signatures are accepted as original signatures.						