

THIS IS THE ONLY NOTICE YOU WILL RECEIVE

BT COMMUNICATIONS SALES LLC  
JAMIE NEWELL  
11440 COMMERCE PARK DR  
RESTON, VA 20191

K:KHQSP1 20131



No. W 8353		Due no later than March 31, 2008 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable BT COMMUNICATIONS SALES LLC JAMIE NEWELL 11440 COMMERCE PARK DR RESTON, VA 20191 <b>New Address</b> 1001 Connecticut Ave NW Suite 720 Washington DC 20036		CORPORATION SERVICE COMPANY 1401 SHORELINE DR STE 2 BOISE, ID 83702	
NO FILING FEE IF RECEIVED BY DUE DATE		3. New Registered Agent Signature			
4. Limited Liability Companies: Enter Names and Addresses of Managers.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
MANAGER	BTAMERICAS INC.	350 MADISON AVENUE	NEW YORK	NY	10017
SIGNATORY	SHEBA CHACKO	11440 COMMERCE PARK DR	RESTON	VA	20191
SIGNATORY	LINDA CICCIO	11440 COMMERCE PARK DR	RESTON	VA	20191
SIGNATORY	JAMIE PAUL NEWELL	11440 COMMERCE PARK DR	RESTON	VA	20191
5. Organized Under the Laws of: DELAWARE W 8353		6. Signature		Date 2/13/08	
Issued 01/02/2008		Name (Typed or Printed) JAMIE PAUL NEWELL		Title SIGNATORY	

Do Not Tape or Staple  
Fold, seal and mail this portion.

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Detach at this perforation and discard this lower portion.

### INSTRUCTIONS FOR THE IDAHO ANNUAL REPORT FORM

- BLOCK 1:** Entity name may not be altered through the use of this form. Pay special attention to the mailing address. If the correct mailing address is not given in Block 1, strike it out and write in the correct address. Note: To ensure future mailings, the corrected address must be inside Block 1.
- BLOCK 2:** To change the registered agent or office, strike the incorrect information and write in the correct information. Note: The office of the registered agent must be at a street address in Idaho; not a Post Office Box or Personal Mail Box
- BLOCK 3:** Only a new registered agent must sign in Block 3.
- BLOCK 4:** Enter names and business addresses of president, secretary, and directors (for corporations only), managers/members (for LLC's Only), one or more general partners (for LP's only). Note: Putting "same as last year" or "same as above" or leaving the block blank will not be accepted. Changes here will not affect the address in Block 1. Be sure to include office held for each name listed.
- BLOCK 5:** May not be altered through the use of this form.
- BLOCK 6:** The annual report must be signed by a person authorized to represent the corporation/LLC/LP. Print or type the name and title of the signer below the signature.

\*\* The image of this form will be available on the Internet once it is filed. DO NOT enter Social Security Numbers. If the (Corporation/Limited Liability Company/limited Partnership) is no longer doing business in Idaho, you may file the appropriate form and fee. Forms are available on our website at [www.idaho.gov](http://www.idaho.gov). However, if the timely annual report is filed, administrative action by the Corporation/Limited Liability Company/limited Partnership to terminate the business is required. (2008) 014 0101

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