

No. W 103962		Due no later than Jun 30, 2017 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. MASTEC NETWORK SOLUTIONS, LLC ERIN SHAUGHNESSY ATTN: LEGAL DEPT 800 S DOUGLAS RD, PENTHOUSE CORAL GABLES FL 33134		CORPORATION SERVICE COMPANY 12550 W EXPLORER DR STE 100 BOISE ID 83713			
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 MEMBER	Name MASTEC, INC.	Street or PO Address 800 DOUGLAS RD 12TH FLOOR		City CORAL GABLES	State FL	Country USA	Postal Code 33134
5. Organized Under the Laws of: FL W 103962		6. Annual Report must be signed.* Signature: Erin Shaughnessy Name (type or print): Erin Shaughnessy Date: 06/14/2017 Title: Licensing Analyst					
Processed 06/14/2017 * Electronically provided signatures are accepted as original signatures.							