

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2012

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000658946	Exact name of the limited liability company Puretalk Holdings, LLC					
3. State of Formation	Brief description of the character of business conducted in Rhode Island					
GA	Resold 1	relecommunica r	tions			
5. Principal office address 4113 Monticello St.			City Covington	State GA	Zip 30014	
	MITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT I	PERSON:		
Contact Name Melissa Driskell			Contact Title Regulatory Manager			
Street Address PO Box 2207			City Covington	State GA	Zip 30015	
7. LIST <u>ALL</u> MANAGERS (NA ("X" BOX FOR ATTACHME	AMES AND ADD	DRESSES) OF THE	LIMITED LIABILITY COMPANY, I	F APPLICABLE - <u>Do</u>	NOT LIST MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
Citv	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN RHO	DE ISLAND	1	1			
This information is currently	of record in th	e Office of the Secr	etary of State. Changes require	filing Form 642.		
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<u>ву 2259</u>	96				19	
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File Date				any accompanying	irm that I have examined schedules and statements, are true and correct,	
Check No					06/02/2014	
Ву:			Signature of Authorize	d Person	Date	
FOR SECRETARY OF STATE USE ONLY			Kelly Jesel			
. J JEGHERMII G. VIAI			Print or Type Name of Authorized Person			

Form No. 632 Revised: 01/2012