State of Rhode Island and Providence Plantations Fee: \$50.00 Office of the Secretary of State			
Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040			
Limited Liability Company			
Annual Report			
Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2016			
1. ID No. <u>000713898</u>			
2. Exact Name of the Limited Liability Company Celcite Management Solutions, LLC			
3. State of Formation			
State: DE			
ARTICLE III			
Using the following NAICS codes, please select the code that best describes your business.			
NAICS Code		6	<u>541330</u>
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
PROVIDES TIMELY AND COST-EFFECTIVE WIRELESS CONSULTING SERVICES AND CUSTOMIZED NETWORK PERFORMANCE TOOLS TO WIRELESS OPERATORS.			
5. Principal Office Addre	SS		
No. and Street: <u>13800</u>	O COPPERMINE RD.		
	<u>E 152</u>		
City or Town: <u>HER</u>	NDON Stat	e: <u>VA</u> Zip: <u>20171</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: <u>13800 COPPERMINE RD.</u> SUITE 152			
City or Town: <u>HERN</u>		e: <u>VA</u> Zip: <u>20171</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addro	ess
	First, Middle, Last, Suffix	Address, City or Town, St	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

NATIONAL CORPORATE RESEARCH, LTD. 222 JEFFERSON BOULEVARD WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 17 Day of October, 2016 at 12:16:41 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>RAHUL SHARMA</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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