	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
148 W. River Street			
	Providence RI 0290 (401) 222-304		
HOPE	(401) 222-304	+0	
Limited Liability Com	npany		
Annual Report Filing Period: September 1	- November 1		
In accordance with R.I.G.L	. 7-16-66(d), each limited liability comp in thirty (30) days after the time presc		
16-66(b&c)) is subject to a	penalty fee of \$25.00.		
ANNUAL REPORT YEAR	<u>2017</u>		
1. ID No. <u>00030792</u>	9		
2. Exact Name of the Li	mited Liability Company <u>ATC Ou</u>	tdoor DAS, LLC	
3. State of Formation			
State: <u>DE</u>			
	ARTICLE III		
-	Code that best describes the primary re information on <u>NAICS</u> can be found		/. Download
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rhc	de Island
	LD DISTRIBUTED ANTENNA S	YSTEMS TO SUPPORT WIF	RELESS
CARRIERS.			
5. Principal Office Addre	ess		
No. and Street: 116 H	UNTINGTON AVENUE		
City or Town: BOST		tate: <u>MA</u> Zip: <u>02116</u> Cour	ntry: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact Person:	
Contact Name: Contact	Title:		
No. and Street: 116 H	UNTINGTON AVENUE		
City or Town: BOST	ON Sta	te: <u>MA</u> Zip: <u>02116</u> Cour	ntry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
Title	First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Co	ode, Country
MANAGER	SPECTRASITE COMMUNICATIONS LLC	116 HUNTINGTON AV BOSTON, MA 02116 US	

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

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914

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

Signed this 2 Day of November, 2017 at 9:44:54 AM 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 MNEESHA NAHATA

Signature of Authorized Person

Form No. 632 Revised 09/07

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