

# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401-222.3040

Matthew A. Brown, Secretary of State

### LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR \_\_\_

2005

Filing Period: Septem (FORM MUST BE TYPED)			Filing Fee: \$50.00						
1. ID No. 108805			one of the limited liability company quiar Wireless PCS, LLC.						
3 State of Formation DELAWARE  4. Brief description of the character of the business white PCS COMMUNICATIONS				c) is actually conducted in Rhode Islan	đ		·		
5. Principal office address				City:	State		Zip		
5565 Glenrid	lge Co	nnector		Atlanta	GA		30342		
6. MAILING ADDRES	SS OF L	MITED LIABILITY O	OMPANY AND NAME	OR TITLE OF CONTACT PERS	ON:				
Contact Name				Contact Tule					
Suzanne Lifi	ring		· · · · · · · · · · · · · · · · · · ·	Assistant Secretary					
Street Address				Clty	State		Zip		
7277 164th A	lvenue	NE, RTC Bldg	1	Redmond	WA		98052		
AN		FILL IN SPACES I	BEFORE USING ATTAC	LITY COMPANY, IF APPLICAL THMENTS ("X" BOX FOR AT ING OF AMENDMENT, R.I.G.I	TACHMENT,		-52		
Manager Name	_			Munager Name					
Cingular Win	celess	LLC					<del>.</del>		
Sirect Address 5565 Glenric	lge Co	nnector		Street Address					
City		State	Z.lp	City	State		Zip		
Atlanta		GA	30342				]		
Manager Name				Manager Name					
Street Address				Street Address					
City State Zip				City	State		Zip		
8. RESIDENT AGENT Agent Name CT CORPORATION SY		ODE ISLAND - DO N	OT ALTER - Changes	require filing of Form 642  Address	R.I.G.L. 7-1	6-11	•		
Address 10 WEYBOSSET STRE	ET			City PROVIDENCE		<i>7.</i> φ 02903			

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

		,	*1088	05*	
File Date	(0)	17/	05		
Check No.	0992	313	37		
Ву:			<u>Cxc</u>	<u>,                                    </u>	
P	OR SECRETARY O	OF STATE	USE ONLY		

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

By Cingular Wireless LLC, Manager

Signature of Municized Person Date

Suzanne Liffring. Assistant Secretary



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

### LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR \_

2004

(FORM MUST BE TYPED	OR PRIN	TED IN BLACK)			· ·			
1. ID No. 108805		Nireless PCS, LLC						
3. State of Formation 4. Brief description of the character of the hustness which			ch is actually conducted in Rhode Islan	d				
DELAWARE PCS COMMUNICATIONS								
5. Principal office address				City	State	Z.ip		
7277 164th	Aven	ue NE		Redmond	WA	98052	,	
6. MAILING ADDRES	SS OF L	MITED LIABILITY O	OMPANY AND NAME	OR TITLE OF CONTACT PERS	ON:			
Contact Name		·		Contact Title	•			
Legal Depa	rtmen	t		State Filings			ļ	
Street Address				City	State	Zip		
7277 164th	Aven	ue NE		Redmond	WA	98052		
7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABI FILL IN SPACES BEFORE USING ATTAC					TACHMENT,	<del></del>		
Manager Name		-		Manager Name				
-	_			риниде нате				
=	ess S	ervices, Inc.						
Sircei Address 7277 164th	Aven	ue NE		Street Address				
City Redmond		State WA	<i>zφ</i> 98052	City	State	Zip		
Manager Name				Manager Name				
Street Address			Street Address					
City State Zip			City	State	Zip			
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes Agent Name CT CORPORATION SYSTEM			require filing of Form 642 -	R.J.G.I., 7-1	6-11	•		
Address 10 WEYBOSSET STRE	ET			City PROVIDENCE		ፖ.φ 02903		

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.



File Date	9	27	104				
Check No.	8 2	291	127				
Ву:	. <u> </u>	DA					
i	FOR SECRETARY OF STATE USE ONLY						

Under penalty of perjury, I declare and affirm that I have examined this report
including any accompanying schedules and statements, and that all statements
ATAT Wireless PCS, LLC
By AT&T Wireless Services, Inc., its Manager
IMMIBITED 9/17/04
Signature of Authorized Person Date

Mary Brodd, Assistant Secretary



### STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Spicretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

Matthew A. Brown, Secretary of State

2003

### LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

Filing Period: Septem (FORM MUST BE TYPED (		• Filing Fee: \$50.00						
1. ID No. 108805		ame of the limited Hahility company						
3. State of Formation	1 '		which is actually conducted in Rho	ode Island	<u> </u>			
DELAWARE	PCS COMMUNIC	CATIONS						
5. Principal office address			City	State	Z.lp			
7277 164th	Ave. NE		Redmond	WA	98052			
6. MAILING ADDRES	S OF LIMITED LIABIL	ITY COMPANY AND NA	ME OR TITLE OF CONTAC	T PERSON:				
Contact Name			Contact Title					
Legal Depar	tment		State Filings					
Street Address			City	State	Zip			
7277 164th	Ave. NE		Redmond	WA	98052			
	FILL IN SPA	CES BEFORE USING ATT	ABILITY COMPANY, IF API FACHMENTS ("X" BOX F FILING OF AMENDMENT,	OR ATTACHMENT) 🗌				
Manager Name			Manager Name					
AT&T Wirele	ss Services, In	c.						
Sircei Address 7277 164th	Ave. NE		Since Address					
City Redmond	State WA	98052	City	State	Zip			
Manager Name	••••••	······································	Manager Name					
Street Address			Street Address					
City	State	Zip	City	State	Zip			
Agent Name		DO NOT ALTER - Chang	es require filing of Form	n 642 - R.I.G.L. 7-16-1	· 1			
CT CORPORATION SY	21FW			2	<del>.</del>			
Address			City	Zip				
10 WEYBOSSET STRE	ET		PROVIDENCE		02903			

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

* 1 0 8 8 0 5 *
File Date 9/30/03 Check No. 07002528
FOR SECRETARY OF STATE USE ONLY

Under penalty of perju	ury. I declare and affirm that I have examined this report.
including any accomp	anying schedules and statements, and that all statements.
contained herein are t	rue and correct.
[&T Wireless ]	PCS, LLC

By: AT&T Wireless Services, Inc., its Manager

Mary Brodd, Assistant Secretary



Edward S. Inman, 111, Secretary of State Corporations Division 100 North Main Street, Providence, RI 02903-1335 401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2002

Filing Period: September 1 - November 1 • Filing Fee: \$50.00

1. ID No.	2. Exact name of the lin				•			
*108805*	AT&T Wireless Po	•		ad ia Dhada Ialand				
3. State of Formation		nion of the character of the NICATIONS	не онзіпезз мліся із асшану сопанси	ousiness which is actually conducted in Rhode Island				
DELAWARE								
5. Principal office ac			City	State	Zip			
7277 164TH 7	AVENUE NE, BUILD	ING 1	REDMOND	WA	98073-09761			
6. MAILING AU	DRESS OF LIMITED	LIABILITY COMP	ANY AND NAME OR TITLE	E OF CONTACT PER	RSON:			
AT&T Wireles	ss PCS, LLC		•					
Street Address	<del></del>	_	City	State	Zip "			
7277 164TH A	VENUE NE, BUILD	ING 1	REDMOND	WA	98073-09761			
I	AND MODIFICATIONS	S TO MANAGERS REO	UIRES FILING OF AMENDMENT.	R.I.G.L, 7-16-12 (a) (2) /	7-16-52			
Manager Name	ANT MODIFICATION:	5 10 110 110 110 112 q			· <del>-</del>			
ŭ			• Manager Name					
AT&T Wireles	ss Services, Inc							
Manager Name AT&T Wireles Street Address 7277 164th 1	ss Services, Inc		• Manager Name •					
AT&T Wireles Street Address	ss Services, Inc		• Manager Name •	State	Ζίρ			
AT&T Wireles Siree Address 7277 164th A	ss Services, Inc	·	• Manager Name • • • Street Address •	State				
AT&T Wireles Street Address 7277 164th I	SS Services, Inc	Zip	• Manager Name • • • Street Address •	State				
AT&T Wireles Street Address 7277 164th A Ciny Redmond Manager Name	SS Services, Inc	Zip	• Manager Name • Street Address • City	State				
AT&T Wireles Street Address 7277 164th I City Redmond	SS Services, Inc	Zip	Manager Name Street Address City Manager Name	State				
AT&T Wireles Street Address 7277 164th A City Redmond Manager Name Street Address City	Sole WA	Zip 98052 Zip	Manager Name  Street Address  City  Manager Name  Street Address  City	State	Zip Zip			
AT&T Wireles Street Address 7277 164th A City Redmond Manager Name Street Address City	Sole WA	Zip 98052 Zip	· Manager Name · Street Address · City · Manager Name · Street Address	State	Zip Zip			
AT&T Wireles Street Address 7277 164th A City Redmond Monager Name Street Address City 8. RESIDENT ACA Agent Name	Sole WA	Zip 98052 Zip	Manager Name  Street Address  City  Street Address  City  City  Changes require filing of	State Form 642 - R.I.G.L. 7	Zip Zip			
AT&T Wireles Street Address 7277 164th A City Redmond Monager Name Street Address City 8. RESIDENT ACA Agent Name	State SENT IN RHODE ISLAN	Zip 98052 Zip	Manager Name  Street Address  City  Manager Name  Street Address  City  Address	State Form 642 - R.I.GL. 7	Zip Zip			

This report must be signed in ink by an authorized person pursuant to 7-16-66.

*108805 FI	LLC10/1/021:14:00 PM*	_
File Date	10.021-02	스
Check No	6462	7/4
By	a.	
FOR SECRET	ARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Person

Mary Brodd, Asst. Sec. of Its Mgr., AT&T Wireless Services, Inc.

File Date:

Check No.:

By:

er De s

AT&T WIRELESS SERVICES, INC

Form No. 632

Revised 01/99



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

#### LIMITED LIABILITY COMPANY

ID	Number FLLC 108805	Annual Report for the year 2001							
1.	The name of the limited liability company is:								
2.	The address of the principal office of the limited liability company is: 7277 164TH AVENUE NE, BUILDING 1, REDMOND, WA 98052								
3.	The state or other jurisdiction under the law	s of which it is formed is DELAWARE							
4.	The name and address of its resident agent	tis: CT CORPORATION SYSTEM							
	10 WEYBOSSET STREET PROVIDENCE	RI 02903							
5.	may be directed are:  AT&T WIRELESS  ATTN: MARY BRO 7277 164TH AVE	DDD, ASSISTANT SECRETARY ENUE NE, BUILDING 1, REDMOND, WA 98052							
6.	A brief statement of the character of the state: PCS COMMUNICATIONS	business in which the limited liability company is actually engaged in thi							
7.	If the limited liability company has manager Name	s, the name and address of each manager of the limited liability company  Address							
	AT&T WIRELESS SERVICES, INC.	7277 164TH AVENUE NE, REDMOND, WA 98052							
Da	ated SEPTEMBER 21, 2001  1 0 8 8 0 5  FOR SECRETARY OF STATE USE ONLY	Under penalty of perjury, I declare and affirm that I have examined thi report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  AT&T WIRELESS PCS, LLC.  Exact Name of Limited Liability Company							

DETACH BOTTOM BEFORE RETURNING

MARY BRODD

MANAGER.

Title



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State **Corporations Division** 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

#### LIMITED LIABILITY COMPANY

D Number	<b>FLLC</b>	108805

Ву:

Annual Report for the year 2000

The name of the limited liability company	y is:
AT&T Wireless PCS, LLC	
The address of the principal office of the	limited liability company is:
7277 164TH AVENUE NE, BLDG.	1, REDMOND, WASHINGTON 98052
The state or other jurisdiction under the	laws of which it is formed is <u>DELAWARE</u>
The name and address of its resident ag	gentis: CT CORPORATION SYSTEM
10 WEYBOSSET STREET PROVIDEN	ICE RI 02903
The current mailing address of the limit	ad liability company and the name or title of a person to whom communications
may be directed are: AT&T WIRELE ATTN: SAND	SS PCS. LLC Y FLYING CLOUD, CORPORATE PARALEGAL
7277 164TH	AVENUE NE BLDG. 1. REDMOND. WA 98052
	the limited liability company
If the limited liability company has mans ivame  AT&T WIRELESS SERVICES. INC.	agers, the name and address of each manager of the limited liability company  Address  7277 164TH AVENUE NE. REDMOND, WA 98052
Name	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
AT&T WIRELESS SERVICES. INC.	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and
AT&T WIRELESS SERVICES. INC.  ated October 5, 2000  1 0 8 8 0 5  FOR SECRETARY OF STATE USB ONLY e Date: /0//3	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.
AT&T WIRELESS SERVICES. INC.  ated October 5, 2000  1 0 8 8 0 5	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  ATAT WIRELESS PCS LCC  Exact Name of Limited Liability Company