State of Rhode Island and Providence Plantations Fee: \$50.0 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: 2019			
1. ID No. <u>000123525</u>			
2. Exact Name of the Limited Liability Company Crown Castle Fiber LLC			
3. State of Formation			
State: <u>NY</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.			
517919			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
WIRELESS INFRASTRUCTURE			
5. Principal Office Address			
No. and Street: 1220 AUGUSTA DRIVE			
SUITE 600			
City or Town: $\overline{\text{HOUSTON}}$ State: $\underline{\text{TX}}$ Zip: $\underline{77057}$ Country: $\underline{\text{USA}}$			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: <u>1220 AUGUSTA DRIVE</u>			
SUITE 600 NOUSTON			
City or Town: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77057</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 Address			

First, Middle, Last, Suffix

JAY A. BROWN

MANAGER

Address, City or Town, State, Zip Code, Country

1220 AUGUSTA DRIVE SUITE 600

		HOUSTON, TX 77057 USA	
MANAGER	DANIEL K. SCHLANGER	1220 AUGUSTA DRIVE SUITE 600 HOUSTON, TX 77057 USA	
MANAGER	KENNETH J. SIMON	1220 AUGUSTA DR. STE 600 HOUSTON, TX 77057 USA	
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 22 Day of July, 2019 at 3:17:12 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 LYNN HOWELL Signature of Authorized Person 			
Form No. 632 Revised 09/07			
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