R		of Rhode Island he Secretary of		Fee: \$50.00
	Division	Of Business Serv	ices	
	148	8 W. River Street		
		ence RI 02904-26	15	
7636	(4	401) 222-3040		
Limited Liability Annual Report Filing Period: Feb.				
r ning r crioù. r ob				
refusing to file its	h R.I.G.L. 7-16-66(d), each lin annual report within thirty (30)) days after the tin		<i>y</i>
· · ·	-66(b&c)) is subject to a pena T YEAR - ENTER THE CURRE		2024	
	761504			
2. Exact Name o	of the Limited Liability Comp	any <u>Atlantic Mobi</u>	ile US LLC	
3. State of Form	ation			
State: <u>DE</u>				
	N	AICS CODE		
	t NAICS Code that best descr t of codes <u>here.</u> More informa			
<u>517312</u>				
4. Brief Descript Island	ion of the Character of the B	usiness Which is	Actually Cond	ucted in Rhode
1				
TO PROVIDE 1	ELECOMMUNICATIONS	SERVICES.		
TO PROVIDE T		<u>SERVICES.</u>		
	ce Address 919 N. MARKET ST.	<u>SERVICES.</u>		
5. Principal Offic	ce Address	<u>SERVICES.</u> State: <u>DE</u>	Zip: <u>19801</u>	Country: <u>USA</u>
5. Principal Office No. and Street: City or Town:	ce Address 919 N. MARKET ST. STE. 950	State: DE		·
5. Principal Office No. and Street: City or Town:	ce Address <u>919 N. MARKET ST.</u> <u>STE. 950</u> <u>WILMINGTON</u> ss of Limited Liability Compa	State: DE		·
 5. Principal Office No. and Street: City or Town: 6. Mailing Address 	ce Address <u>919 N. MARKET ST.</u> <u>STE. 950</u> <u>WILMINGTON</u> ss of Limited Liability Compa	State: DE		- <u> </u>
 5. Principal Office No. and Street: City or Town: 6. Mailing Address Contact Name: 	ce Address 919 N. MARKET ST. STE. 950 WILMINGTON ss of Limited Liability Compa Contact Title:	State: DE	Fitle of Contact	t Person:

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

INCORP SERVICES, INC. 222 JEFFERSON BLVD. SUITE 200 WARWICK , RI 02888

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

Signed this 7 Day of February, 2024 at 11:52:30 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 MATT MILLER

Signature of Authorized Person

Form No. 632 Revised 09/07

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