Control Number : 25189096

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF AUTHORITY

I, **Brad Raffensperger**, the Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

Brightspeed Fiber Connection LLC
a **Foreign Limited Liability Company**

has been duly formed under the laws of **Delaware** and has filed an application meeting the requirements of Georgia law to transact business as a **Foreign Limited Liability Company** in this state.

WHEREFORE, by the authority vested in me as Secretary of State, the above **Foreign Limited Liability Company** is hereby granted, on **09/25/2025**, a certificate of authority to transact business in the State of Georgia as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said application.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on **09/29/2025**.

Brad Raffensperger

Brad Raffensperger
Secretary of State

Secretary of State

OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
(404) 656-2817
sos.georgia.gov/corporations

2025 SEP 25 AM 11:59
SECRETARY OF STATE
CORPORATIONS DIVISION

APPLICATION FOR CERTIFICATE OF AUTHORITY FOR FOREIGN LIMITED LIABILITY COMPANY

IMPORTANT: Please provide the entity's primary email address when completing this form.
Primary Email Address: cls-annualreportfilingteam@wolterskluwer.com

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

1. Brightspeed Fiber Connection LLC
Name of Limited Liability Company

Name Reservation Number (Optional)

11/1/2025
Date business commenced (or proposed) in Georgia (NOTE: If date provided here is more than 30 days prior to the effective date of this application, a $500 penalty plus fees must be paid. Penalty is statutory and cannot be waived by Secretary of State.)

2. Trudy-Anne McLeary
Name* of Filing Person

1120 S Tryon Street | Charlotte | NC | 28203
Address | City | State | Zip Code

trudyanne.mcleary@brightspeed.com
Filer's Email Address

3. Brightspeed Fiber Connection LLC
Name of Limited Liability Company in State or Country of Formation

Delaware | 11/26/1997 | Perpetual
Jurisdiction (Home State or Country) | Date of Formation in Home State or Country | Period of Duration

4. 1120 S Tryon Street | Charlotte | NC | 28203
Address of Principal Place of Business | City | State | Zip Code

5. C T Corporation System
Name* of Registered Agent in Georgia

FFInboxATL@wolterskluwer.com
Registered Agent's Email Address

289 S Culver St
Registered Office Street Address in Georgia (post office box or mail drop not acceptable for registered office address)

Lawrenceville | Gwinnett | GA | 30046-4805
City | County | State | Zip Code

6. SEE ATTACHED
Manager's Name* & Address (person with substantial responsibility for managing LLC's business activities) | City | State | Zip Code

7. 1120 S Tryon Street | Charlotte | NC | 28203
Address Where Limited Liability Company's Records Are Maintained | City | State | Zip Code

8. Effective Date: (Choose one) X Upon filing Delayed effective date and/or time: _____
(A delayed effective date must be within 90 days of the filing date.)

9. **NOTICE:** Mail the following items to the Secretary of State at the above address
(1) This application;
(2) Fee of $235.00 ($225 filing fee + $10 service charge) payable to "Secretary of State." Filing fees are non-refundable.

This application is signed by a person duly authorized to sign such instruments by the laws of the jurisdiction under which the foreign limited liability company is organized. The foreign limited liability company undertakes to keep its records at the address shown in #7 above until its registration in Georgia is canceled or withdrawn. The foreign limited liability company, in accordance with Title 14 of the Official Code of Georgia Annotated, appoints the Secretary of State as agent for service of process if no agent has been appointed in Georgia or, if appointed, the agent's authority has been revoked or the agent cannot be found or served by the exercise of reasonable diligence.

Terrie Medina
Signature of Authorized Person

09/24/2025
Date

TERRIE MEDINA
Print Name*

AUTHORIZED PERSON
Title

* Enter individual's legal name, i.e. first and last name without use of initials or nicknames. Middle names or initials may be included.

Management Structure

NAME TITLE ADDRESS

Colon McLean, Manager - 1120 S Tryon Street, Charlotte, NC 28203

Jacky Wu, Manager - 1120 S Tryon Street, Charlotte, NC 28203

Connect Holding II LLC, Member - 1120 S Tryon Street, Charlotte, NC 28203

Embarq, L.L.C., Member - 1120 S Tryon Street, Charlotte, NC 28203