F00000001292

(Requestor's Name)	
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(Business Entity Name)	
(Document Number)	
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OIVISION CE CORPORATIONS
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D CUSHING

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500	
ACCOUNT NO. : I2000000195 	
AUTHORIZATION : 15 35.00 35.00	
ORDER DATE: September 15, 2017 ORDER TIME: 12:10 PM	1. 1.
ORDER NO. : 818513 010	ORETA CON G
CUSTOMER NO: 7219739	CORP CORP
FOREIGN FILINGS	AMIO: 57
NAME: MESHNETWORKS, INC.	
XX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY	
XXXX WITHDRAWAL/CANCELLATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS	
CONTACT PERSON: Melissa Zender - EXT#	

EXAMINER:

COVER LETTER

	Amendment Section Division of Corporations		
SUBJE	MeshNetworks, Inc.		
SOME	C1.	(Name of Corporatio	n)
DOCU	MENT NUMBER: F00000	 001292 	
The enc	losed withdrawal applicati	 on and fee are submitted for f	iling.
	eturn all correspondence cor o the following:	cerning this	
	Kely Granados		
	Arris Group, Inc.	(Name of Person)	17 17
		(Firm/Company)	
	3871 Lakefield Drive		15 310 51
		(Address)	S 50:5
	Suwanee, GA 30024		<u>ني</u> - ا
		(City/State and Zip code	
For furt	her information concerning t	 his matter, please call: 	
		at ()_	
Enclose	(Name of Person) d is a check for the amount:	(Area Coo	de & Daytime Telephone Number)
\$35 1	Filing Fee \$43.75 Filing Certificate of	Fee &\$43.75 Filing Fee & Status Certified Copy (Additional copy is Enclosed)	Certificate of Status & Certified
	MAILING ADDRES Amendment Section Division of Corporati P.O. Box 6327 Tallahassee, FL.3231	ons	STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

MeshNetworks, Inc.	
	(Name of Corporation)
F0000001292	
(Docum	nent Number of Corporation (if known)
Delaware	
	(Incorporated Under Laws of)
his corporation is no longer transacting	business or conducting affairs within the State of Florida and hereby
oluntarily surrenders its authority to trans	sact business or conduct affairs in Florida.
This corneration revokes the authority of	of its registered agent in Florida to accept service on its behalf and
	gent for service of process based on a cause of action arising during
ne time it was authorized to transact busin	
1)	7 9
The following is a current mailing address	
1064 Greenwood Blvd, Suite 400	
Too T cite i Mod Bivd, danc Too	(M. 9). A 17
	(Mailing Address)
Lake Mary, FL 32746	(Mailing Address)
Lake Mary, 7 E 32740	10° 16° 16°
	(City/ State /Zip)
he corporation agrees to notify the Depar	rtment of State in the future of any change in its mailing address.
10/1	,
	9/15/2017
(Signature of a director, president or other office receiver or other court appointed fiduciary, I	ricer - if in the hands of a (Date) by that fiduciary)
Gaines P. Carter	Vice President Tax, Assistant Secretary
(Typed or printed name of person sig	gning) (Title of person signing)
,,,,	(Time of person alguing)

FILING FEE \$35