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	(Requestor's Name)			
	(Address)			
	(Address)			
<u> </u>	(City/State/Zip/Phone #)			
☐ biCk'n	D WAIT MAIL			
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer.				





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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 612660 AUTHORIZATION : COST LIMIT : ORDER DATE: January 12, 2021 ORDER TIME : 12:57 PM ORDER NO. : 612660-005 CUSTOMER NO: 7156704 FOREIGN FILINGS NAME: T-MOBILE RESOURCES CORPORATION XX___ CORPORATE ____ LIMITED PARTNERSHIP ____ LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ____ PLAIN STAMPED COPY ___ CERTIFICATE OF STATUS

EXAMINER: ____

CONTACT PERSON: Amanda Robinson - EXT# 62968

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	T-MOBILE RESOURCES CORPO	DRATION
9 00 91	ЕСТ:	(Name of Corporation)
DOCU	JMENT NUMBER:	
The en	closed withdrawal application and	fee are submitted for filing.
Please	return all correspondence concerning	g this matter to the following:
	JULIE NELSON, LEGAL DEPT.	
		(Name of Person)
	T-MOBILE	
		(Firm/Company)
	12920 SE 38TH STREET	
		(Address)
	BELLEVUE, WA 98006	
	((City/State and Zip code)
For fur	ther information concerning this ma	tter, please call:
JULIE NELSON		425 383-6211 at ()
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclos	ed is a check for the amount:	
	-	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy (Additional copy is Enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

T-MOBILE RESOURCES CORPORATION	
(Name of Corporation	
(Document Number of Corporatio	n (if known)
DE 05/22/1998	
(Incorporated Under Laws of and date authorized to trans	act business/conduct its affairs)
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conduc	
This corporation revokes the authority of its registered agent is appoints the Department of State as its agent for service of procestime it was authorized to transact business or conduct affairs in F	ss based on a cause of action arising during the
The following is a current mailing address for the corporation:	2021
12920 SE 38TH STREET, C/O JNELSON, LEGAL DEPT.	
(Mailing Address)	
BELLEVUE, WA 98006	
(City/ State /Zip)	7 H
The corporation agrees to notify the Department of State in the fu	nture of any change in its mailing address.
katie True-autry	1/12/2021 10:45 AM PST
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
KATIE TRUE-AWTRY	ASST. SECRETARY
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35