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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 : (850) 521-1000 Phone

Fax Number

: (850)558-1515

DISSOLUTION OR WITHDRAWAL LOCAL MATTERS VOICE AND WIRELESS DIVISION, INC

| Certificate of Status | 0 |
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9/15/2010

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

| | LOCAL MATTERS VOICE and wineless Division, Inc (Name of Corporation) |
|----------|---|
| | |
| | n-vi |
| | <u></u> |
| | (Document Number of Corporation (if known) |
| | |
| _ | (Document Number of Corporation (if known) Corporation (if known) |
| | Oclaware 55 |
| | (incorporated Onder Laws of) |
| | |
| This co | rporation is no longer transacting business or conducting affairs within the State of Florida and hereby |
| voluntai | rily surrenders its authority to transact business or conduct affairs in Florida. |
| | , |
| This co | rporation revokes the authority of its registered agent in Florida to accept service on its behalf and |
| | s the Department of State as its agent for service of process based on a cause of action arising during the |
| ime it v | vas authorized to transact business or conduct affairs in Florida. |
| | · |
| The foll | owing is a current mailing address for the corporation: |
| | |
| | (30) Nin 5th love, Ste 4000 |
| | (Mailing Address) |
| | (consideration) |
| | |
| | Ft. Laudendale Fl 33309.6129 |
| | (City/ State /Zip) |
| | |
| | |
| The corp | poration agrees to notify the Department of State in the future of any change in its mailing address. |
| | \mathcal{A} |
| | 9 14 10 |
| 7 | Signature of a director president of other officer - if in the hands of a (Date) receiver or other count appointed figureary, by that fiduciary) |
| | receiver or other count appointed fiduciary, by that fiduciary) |
| | |
| | THOMAS R. BASILICO CONTROLLEN (Typed or printed name of person signing) (Title of person signing) |
| - | (Typed or printed name of person signing) (Title of person signing) |
| | |
| | FILING FEE \$35 |
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