

F13000001846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

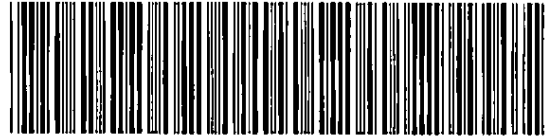
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

2019 JAN 17 AM 9:54

STATE OF FLORIDA
TALLAHASSEE, FL

RECEIVED
19 JAN 17 PM 1:51
TALLAHASSEE, FL

C. GOLDEN
JAN 18 2019

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 588915 4321040

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : January 16, 2019

ORDER TIME : 1:18 PM

ORDER NO. : 588915-005

CUSTOMER NO: 4321040

FOREIGN FILINGS

NAME: ENHANCED COMMUNICATIONS OF
NORTHERN NEW ENGLAND 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: Emily Croft - EXT# 62925

EXAMINER: _____

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

FILED
2019 JAN 17 AM 9:54
STATE OF FLORIDA
TALLAHASSEE, FL

Enhanced Communications of Northern New England Inc.

(Name of Corporation)

F13000001846

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

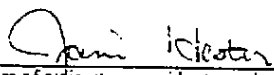
c/o Consolidated Communications, Inc., 121 South 17th Street

(Mailing Address)

Mattoon, IL 61938

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Janice Hester

(Typed or printed name of person signing)

01 / 15 / 2019

(Date)

Sr. Director of Tax

(Title of person signing)

FILING FEE \$35