

F190000002912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

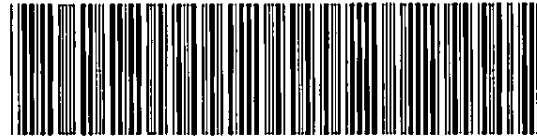
(Business Entity Name)

(Document Number)

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2022 MAR -3 PM12:35

CLERK OF STATE  
TALLAHASSEE, FL

REC'D

2022 MAR -3 AM11:58

CLERK OF STATE  
TALLAHASSEE, FL

Withdrawal

MAR 04 2022

ALBRITTON

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

ACCOUNT NO. : I20000000195

REFERENCE : 524960 8265997

AUTHORIZATION

COST LIMIT : \$ 35.00

ORDER DATE : March 3, 2022

ORDER TIME : 9:35 AM

ORDER NO. : 524960-020

CUSTOMER NO: 8265997

FOREIGN FILINGS

NAME: NEXMO 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: Alexxis Weiland - EXT#

EXAMINER:

10

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

NEXMO INC.

\_\_\_\_\_  
(Name of Corporation)

F19000002912

\_\_\_\_\_  
(Document Number of Corporation (if known))

06/24/2019

\_\_\_\_\_  
(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

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:

23 Main Street

\_\_\_\_\_  
(Mailing Address)

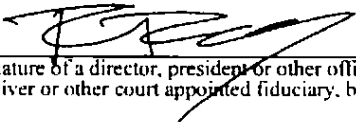
Holmdel, NJ 07733

\_\_\_\_\_  
(City/ State /Zip)

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SECRETARY OF STATE  
TALLAHASSEE, FL

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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)

Randy K. Rutherford

\_\_\_\_\_  
(Typed or printed name of person signing)

02/23/2022

\_\_\_\_\_  
(Date)

Vice President & Secretary

\_\_\_\_\_  
(Title of person signing)

**FILING FEE \$35**