

F9700000397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

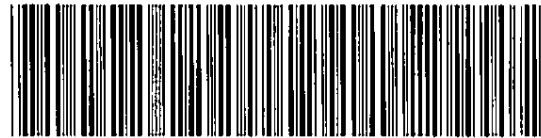
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 SEP 26 AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 SEP 26 PM 2:22

WD

SEP 27 2017

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

ACCOUNT NO. : I20000000195

REFERENCE : 821978 7219739

AUTHORIZATION

COST LIMIT : \$35.00

ORDER DATE : September 19, 2017

ORDER TIME : 1:05 PM

ORDER NO. : 821978-180

CUSTOMER NO: 7219739

FOREIGN FILINGS

NAME: GENERAL INSTRUMENT CORPORATION

XXX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XXX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: _____

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

General Instrument Corporation

(Name of Corporation)

F97000003997

(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:

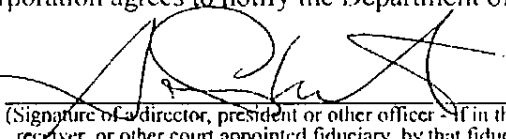
3871 Lakefield Drive

(Mailing Address)

Suwanee, GA 30024

(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)

Graines Carter

(Typed or printed name of person signing)

9/21/2017

(Date)

Assistant Secretary

(Title of person signing)

FILING FEE \$35

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17 SEP 26 AM 8:46
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DEPARTMENT OF STATE
TALLAHASSEE FLORIDA