

L16000102526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

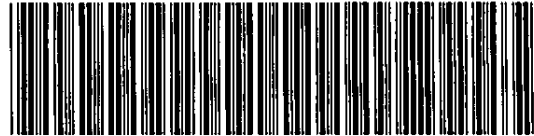
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900288464929

08/03/16--01027--001 \*\*25.00

FILED  
16 AUG 3 PM 1:46  
TALLAHASSEE, FLORIDA

AUG 03 2016  
Y SULKER



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: USA Telecom Insurance Services, LLC

2. The Florida document/registration number assigned to this limited liability company is: L16000102526

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/28/2016

4. I, Highpoint Telecom, LLC, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Member/Manager

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)