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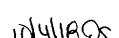
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: TAD Wireless (Name of Limited Liability Compa	eny)
The enclosed member, resignation or dissociation and fee(s) a	re submitted for filing.
Please return all correspondence concerning this matter to:	
Manar Ettagem (Contact Person)	
JAD Wireless (Firm/Company)	
11012 Standing Stone D.	•
Winawng FL. 33598 (City/State and Zip Code)	.,
For further information concerning this matter, please call:	
Mame of Contact Person at (813) (Area Code &	Pacifo
Enclosed please find a check made payable to the Florida Dep \$25 Filing Fee \$25 Filing Fe	partment of State for: ee & Certified Copy
Registration Section R Division of Corporations D Clifton Building P.	egistration Section ivision of Corporations O. Box 6327

Tallahassee, Florida 32301

CR2E079 (2/14)



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:	TAD Wiyaless LLC.
2. The Florida doc	ument/registration number assigned to this limited liability company is:
3. The date this me	ember/manager withdrew/resigned or will withdraw/resign is: 69-25-18
4. I. E Made (Print N	hereby withdraw/resign as a co
M c.((Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of D	issociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
Certified Copy:	\$30.00 (Optional)