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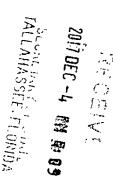
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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Nationwide Communications Services

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Thomas Botlick

(Contact Person)

Nationwide Communications Services (Firm/Company)

P.O. Box 618133

(Address)

Orlando, FL 32861

(City/State and Zip Code)

For further information concerning this matter, please call:

Thomas Botlick

at (407-468-3050

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
\$\infty\$\$ \$25 Filing Fee & Certified Copy

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

CR2E079 (2/14)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



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)

The name of the limited liability company as it appears on the Department of State is: Nationwide Communications Services.	records of the Florida
2. The Florida document/registration number assigned to this limit. L980000685.	ited liability company is:
 The date this member/manager withdrew/resigned or will with 2017 	draw/resign is: November 15,
4. I, James Usher, hereby withdraw/resign as a (Print Name of Person Resigning)	
President	F #
(Print Title)	
	කා ලෝ
of this limited liability company and affirm the limited liability resignation in writing.	company has been notified of my
Anne 1862.	> ==
J Way (A H) Wh	- : : : : : : : : : : : : : : : : : : :
Signature of Dissociating Member or Resigning Manager	44 - 75 - 75 - 75 - 75 - 75 - 75 - 75 -

Filing Fee:

Certified Copy:

\$25.00 (Required) \$30.00 (Optional)