M0200000203

(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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SUFFICIENCY OF FILING

RECEIVE STATE OF STAT

15 NOV 24 AM II: 34

NOV 2 5 2015 Y SULKER CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 881704 4360800

AUTHORIZATION : THE BELLENA

COST LIMIT : '\$' 25.00

ORDER DATE: November 20, 2015

ORDER TIME : 9:51 AM

ORDER NO. : 881704-050

CUSTOMER NO: 4360800

FOREIGN FILINGS

NAME: BOOST MOBILE, LLC

____ CORPORATE

LIMITED PARTNERSHIP

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER:

COVER LETTER

TO:

Registration Section

Division of	Corporations		
Boos	t Mobile, LLC		
30D0LC1	(Name of Fo	reign Limited Liability (Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	d for filing.	
Please return all con	respondence concerning this	matter to the following:	:
Lora E. Keithle	y		
	(Name of Person)		
Sprint			
<u> </u>	(Firm/Company)	<u> </u>	
6200 Sprint Pa	rkway, MS:KSOPHF()302-3B124	
	(Address)		
Overland Park,	KS 66251		
	(City/State and Zip Cod	c)	
For further informati	on concerning this matter, p	lense call:	
Lora E. Keithle	у	913	794-1411
(И	ame of Person)		Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, Florida 32314	
	for the following amount:		
□ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Boost Mobile	, LLC			
	(Name of limited liability company)		_	
Delaware				
	(Jurisdiction of its organization)		-	
1/23/2002				
	(Date registered with Florida Department of State)			
M020000002	203			
	(Florida Document Number)		_	
This limited lia	ability company is withdrawing its certificate of authority in this state.			
	(Signature of authorized representative)			
	Stefan K. Schnopp			
	(Typed or printed name of signee)	LALIASSEE, FLO	15 NOV 24 AM II: 3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Filing Fee: \$25.00