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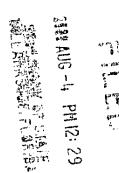
(Re	equestor's Name)	
. (Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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T. CLINE

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EXAMINER

m02-2511

COVER LETTER

	on Section of Corporations			
SUBJECT: Noki	ia Siemens Networks C	onvergence LLC	•	
	(Name of Fo	reign Limited Liability	Company)	
•				
Dear Sir or Madam	:			
The enclosed without	Irawal and fee(s) are submitt	ed for filing.		
Please return all co	rrespondence concerning thi	s matter to the following	g:	
Jill Piasecki				
	(Name of Person)		-	
				med that
	(Firm/Company)		-	
				100-1
				CARL TO
20617 Highlar	nd Lake Loop			
	(Address)			PM 12: 29
Lago Vista, TX	X 78645			1
Lago Viola, 17	(City/State and Zip Co	de)	•	
	,	,		
For further informa	tion concerning this matter,	please call:		
Jill Piasecki		at (214	244-3170	
(1	Name of Person)	(Area Code &	Daytime Telephone Number)	
STREET/ Registration	COURIER ADDRESS:		ING ADDRESS: ration Section	
	of Corporations		on of Corporations	
Clifton Bu		P.O. Box 6327		
2661 Exec	cutive Center Circle ee, Florida 32301		assee, Florida 32314	
Enclosed is a chec	k for the following amount	:		
\$25 Filing Fee	\$30 Filing Fee &	\$55 Filing Fee &	\$60 Filing Fee,	
	Certificate of Status	Certified Copy	Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

4 · 4 · 5

(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
This limited liability company is no longer transacting business in Floridauthority to transact business in this state.	da and surrenders its
This limited liability company revokes the authority of its registered agent its behalf and appoints the Department of State as its agent for service of cause of action arising during the time it was authorized to transact business	to accept service on f process based on a in Florida.
6000 Connection Drive, MC 4C-1580	
(Mailing address)	
Irving, TX 75039	
(City/State/Zip)	
The limited liability company agrees to notify the Department of State change in its mailing address.	in the future of any
AMIBA	
Signature of member or authorized representative of a member)	The state of the s
Roland J. Behm, Manager	A A G
(Typed or printed name of signee)	
	15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	75 5

Filing Fee: \$25.00