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(Reque	estor's Name)	
(Addre	ess)	
(Addre	:55)	
(laul	,,,,,	
(City/S	tate/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Pusin	ess Entity Na	ma)
(Dusin	ess Endly IVa	nie)
(Docum	ment Number)
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	
	A. l	UNT
	OCT	2 7 2010
	EXA	MINER

Office Use Only



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COVER LETTER

TO:

Registration Section

Division of C	Corporations				
SUBJECT: LCC V	VIRELESS DESIGN	SERVICES, LLC			
SUBJECT:		eign Limited Liability C	Company)		
Dear Sir or Madam:					
The enclosed withdray	val and fee(s) are submitte	d for filing.			
Please return all corres	spondence concerning this	matter to the following:			
				₹.c	20
BRIAN DUNN					180
	(Name of Person)			RETARY OF STATAHAHASSEE: FLORI	2010 OCT 26 PH 4: 96
				ARY SSE	26
LCC INTERNAL	TONAL INC			2	3
	(Firm/Company)			FLO	÷
				RE	
4800 WESTFIE	LD BLVD., SUITE 2	00		727	
	(Address)				
CHANTILLY VA	20151				
CHANTILLY, VA	(City/State and Zip Cod	e)			
	, , , , , ,				
For further informatio	n concerning this matter, p	blease call:			
BRIAN DUNN		at (703	873-2000		
	ne of Person)		Daytime Telephone Number)		
(1.41	,	V	,		
STREET/CO	OURIER ADDRESS:	MAIL	ING ADDRESS:		
Registration		Registration Section			
Division of C		Division of Corporations P.O. Box 6327			
Clifton Build	ing ve Center Circle	Tallahassee, Florida 32314			
	Florida 32301				
Enclosed is a check f	or 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

LCC WIRELESS DESIGN SERVICES LLC
LCC WIRELESS DESIGN SERVICES LLC
(Name of limited hability company)
DELAWARE
(Jurisdiction of its organization)
M03000003220
(Florida Document Number)
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.
This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.
4800 WESTFIELD BLVD., SUITE 200
(Mailing address)
CHANTILLY, VA 20151
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Signature of member or authorized representative of a member)
BRIAN DUNN, MANAGER

Filing Fee: \$25.00

(Typed or printed name of signee)