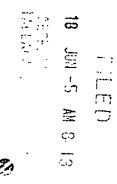
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(R	equestor's Name)	-
(A	ddress)	<u> </u>
(A	ddress)	
(C	ity/State/Zip/Phone #	//)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name	\(\begin{array}{c} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
(D	ocument Number)	
Certified Copies	Certificates o	of Status
· Special Instructions to	Filing Officer:	

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TO THE S PM IN 17

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 242945 AUTHORIZATION COST LIMIT : ORDER DATE: June 5, 2018 ORDER TIME : 2:08 PM ORDER NO. : 242945-050 CUSTOMER NO: 4360800 FOREIGN FILINGS NAME: NEXTEL PARTNERS EQUIPMENT LLC ___ CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Roxanne Turner - EXT#

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Nextel Partners Equipment LLC	
(Name of limited liability company)	7 H 6
Nevada	5개 설
(Jurisdiction of its organization)	3
January 12, 2006	**
(Date registered with Florida Department of State)	2
M0600000203	 50
(Florida Document Number)	Pa
This limited liability company is withdrawing its certificate of authority in th	
Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory	•
this date will not be listed as the document's effective date on the Departmen	
(Signature of anthorized representative)	
Katie True-Awtry, Assistant Secretary of Member	
(Typed or printed name of signee)	

Filing Fee: \$25.00