M06000000298

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:

Office Use Only



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4 SEP 18 PH 2: 25

SEP 1 9 2014

T. BROWN



ACCOUNT NO. : 12000000195

REFERENCE : 302919

7156704

AUTHORIZATION : C

COST LIMIT : \$ 25.00

ORDER	DATE	•	September	18.	2014	
	177111	•	nebreimer	ΤΟ,	2017	

ORDER TIME : 3:45 PM

ORDER NO. : 302919-010

CUSTOMER NO: 7156704

FOREIGN FILINGS

NAME: METROPCS NETWORKS, LLC

CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

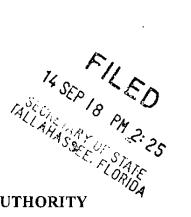
___ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER:

COVER LETTER

TO: Registration Division of	1 Section Corporations		
Metro	PCS Networks, LLC	;	
SUBJECT:	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	ed for filing.	
Please return all corr	respondence concerning this	s matter to the following	;
Corporation Se	rvice Company		
,	(Name of Person)		-
	(Firm/Company)		•
	(Address)		
	(City/State and Zip Coo	ie)	
For further information	on concerning this matter, p	olease call:	
		st ()
(Ne	ame of Person)	(Area Code &	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 Tallahassee, Florida 32314	
Enclosed is a check	for the following amount:		
2 \$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

MetroPCS Networks, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
1/19/2006
(Date registered with Florida Department of State)
M0600000298
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
SWL
(Signature of authorized representative)
Sarah E. Mock, Assistant Secretary
(Typed or printed name of signee)

Filing Fee: \$25.00