(Requestor's Nar	ne)
(Address)	
(Address)	
(City/State/Zip/Pi	
(Business Entity	Name)
(Document Num	ber)
Certified Copies Certific	ates of Status

Special Instructions to Filing Officer:

A. LUNT

APR 25 2011

EXAMINER

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UN SERVICE COMPANY	
ACCOUNT NO. : 1200	00000195
REFERENCE : 1795	86 4701624
AUTHORIZATION	denan
COST LIMIT : \$ 25	.00
ORDER DATE : April 24, 2012	
ORDER TIME : 1:55 PM	
ORDER NO. : 179586-005	₹ ₄ 2
CUSTOMER NO: 4701624	2812 APR
FOREIGN FILINGS	2 P P P P P P P P P P P P P P P P P P P
NAME: NIGHT VISION SYSTEMS,	LLC
CORPORATE LIMITED PARTNERSHIP XXX LIMITED LIABILITY COMPANY	
XXXX WITHDRAWAL/CANCELLATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF	F FILING:
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF STATUS	
CONTACT PERSON: Stephanie Milnes - EXT	Γ# 2920
EXAMIN	NER:

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

Night Vision Systems, LLC
(Name of limited liability company)
Delaware
(Jurisdiction of its organization)
M0700002099
(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.
c/o DRS Technologies, Inc., 5 Sylvan Way (Mailing address)
Parsippany, New Jersey 07054
و (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)
Jason Rinsky, Vice President - Taxation
(Typed or printed name of signee)

Filing Fee: \$25.00