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(R	equestor's Name)	
	.ddress}	
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(A	ddress)	
	A CONTRACTOR CONTRACTOR	
(C	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(8	usiness Entity Name)	
(D	ocument Number)	
	0.46.4	4000
certified Copies	Certificates of	or Status
Special Instructions to Fil	ling Officer:	
Section Ristroctions to 1 ii	ing Officer.	

Office Use Only



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LLC Withdrawal 7022 DEC -5 AM 10: 28

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2022 DEC -5 AMT1: 08

A. RAMSEY
DEC - 6 2022

CORPORATE

When you need ACCESS to the world

ACCESS,

INC.

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	CERTIFIED COPY	
XX	РНОТОСОРУ	
	CUS	
XX	FILING	WITHDRAWAL
	MCLEODUSA INFORM	MATION SERVICES LLC MENT #)
- ,	(CORPORATE NAME AND DOCU	MENT #)
	(CORPORATE NAME AND DOCU	MENT #)
- (CORPORATE NAME AND DOCU	MENT #)
	CORPORATE NAME AND DOCU	MENT#)

COVER LETTER

то:			Section orporations		
SUBJE		1CLEO	DUSA INFORMATIO	N SERVICES LLC	
70 DJ L	CI	<u>.</u>	(Name of F	oreign Limited Liabilit	y Company)
Dear Sir	r or Ma	dam:			
The enc	losed w	rithdray	val and fee(s) are submi	tted for filing.	
Please re	eturn al	l corres	spondence concerning th	is matter to the followi	ng:
Anthon	y Holm	ies			
		<u> </u>	(Name of Person)		<u> </u>
Register	red Ago	ent Solu	tions, Inc.		
			(Firm/Company)		_
5301 So	outhwes	it Pkwy	Suite 400		
			(Address)		<u> </u>
Austin,	TX 787	735			
			(City/State and Zip Co	ode)	_
For furth	ner info	rmatior	concerning this matter,	please call:	
Anthony	v Holm	cs		888 at (705-7274
		(Nam	e of Person)		& Daytime Telephone Number)
	Regis Divis P.O. I	ion of 30x 61	Section Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed	is a cl	heck fo	r the following amount	l:	
■\$ 25 F	iling Fe	ee l	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy

	.*
NOTIC	E OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY
	NFORMATION SERVICES LLC
MCLEODUSA I	NFORMATION SERVICES LLC
	NFORMATION SERVICES LLC (Name of limited liability company)
	(Name of limited liability company) (Jurisdiction of its organization)
Delaware	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
<u>-</u>	(Jurisdiction of its organization)
5/11/2010	
<u> </u>	(Date registered with Florida Department of State)
M10000002147	
_	(Florida Document Number)
This limited lia	ability company is withdrawing its certificate of authority in this state.
Effective Date,	if other than the date of filing: (optional)
	date is listed, the date must be specific and cannot be prior to date of filing or
	ays after filing.) te inserted in this block does not meet the applicable statutory filing requirements.
this date will n	ot be listed as the document's effective date on the Department of State's records.
	•
	Michelle Supin
	Curonacos à impor
	(Signature of authorized representative)
	(Signature of authorized representative)
	Michelle Simpson, Vice President and Asst Corp Secretary
	(Typed or printed name of signee)

Filing Fee: \$25.00