## M11000001859

| (Requestor's Name)                      |  |  |  |  |
|---|--|--|--|--|
|   |  |  |  |  |
| (Address)                               |  |  |  |  |
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| (Address)                               |  |  |  |  |
| (1001000)                               |  |  |  |  |
|   |  |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |  |
|   |  |  |  |  |
| (Business Entity Name)                  |  |  |  |  |
|   |  |  |  |  |
| (Document Number)                       |  |  |  |  |
| ,                                       |  |  |  |  |
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| Special Instructions to Filing Officer: |  |  |  |  |
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| <u> </u>                                |  |  |  |  |

Office Use Only





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18 JUH 29 ANIO: 53

J I FGGETT JUN 02 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

. . .

| ACCOUNT NO. : I2000000195                                    |  |  |  |  |  |
|--|--|--|--|--|--|
| REFERENCE : 281275 8041220                                   |  |  |  |  |  |
| AUTHORIZATION Spelle Comments                                |  |  |  |  |  |
| COST LIMIT : U\$ 25.00                                       |  |  |  |  |  |
| ORDER DATE : June 29, 2018                                   |  |  |  |  |  |
| ORDER TIME : 9:32 AM   |  |  |  |  |  |
| ORDER NO. : 281275-020                                       |  |  |  |  |  |
| CUSTOMER NO: 8041220   |  |  |  |  |  |
|  |  |  |  |  |  |
| FOREIGN FILINGS  |  |  |  |  |  |
|  |  |  |  |  |  |
| NAME: ROCHESTER WIRE AND CABLE 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: Emily Croft - EXT# 62925

## **COVER LETTER**

|   | gistration Section ision of Corporations                                 |   |   |  |
|---|--|---|---|--|
| SUBJECT:  | Rochester Wire and Cable LLC (Name of Foreign Limited Liability Company) |   |   |  |
| SUBJECT   |  |   |   |  |
| Dear Sir or h   | Лаdam:   |   |   |  |
| The enclosed  | d withdrawal and fee(s) are submitte                                     | ed for filing.  |   |  |
| Please return   | all correspondence concerning this                                       | s matter to the following   | ţ:  |  |
| Kris Block  |  |   |   |  |
|   | (Name of Person)   |   | -   |  |
| TE Connect  | ivity  |   |   |  |
|   | (Firm/Company)   |   | -   |  |
| 1050 Westla   | ikes Drive   |   |   |  |
|   | (Address)  |   | =   |  |
| Berwyn, PA  | 19312  |   |   |  |
| -   | (City/State and Zip Cox  | ic)   | -   |  |
| For further in  | formation concerning this matter, p                                      | please call:  |   |  |
| Kris Block  |  | 610   | 893-9545  |  |
|   | (Name of Person)   | at (at (Area Code &   | Daytime Telephone Number)                                       |  |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle |  | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |   |  |
|   | ahassee, Florida 32301  check for the following amount:                  |   |   |  |
|   |  |   | Electric p  |  |
| □ \$25 Filing   | Fee \$\Bigsiz \$30 Filing Fee & Certificate of Status                    | □ \$55 Filing Fee &<br>Certified Copy   | ☐ \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |  |

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| Rochester Wire and Cable LLC   |
|--|
| (Name of limited liability company)  |
| Delaware   |
| (Jurisdiction of its organization)   |
| 04/13/2011   |
| (Date registered with Florida Department of State)   |
| M11000001859   |
| (Florida Document Number)  |
| This limited liability company is withdrawing its certificate of authority in this state.  Effective Date, if other than the date of filing: |
| (Signature of authorized representative)   |
| Harold G. Barksdale  |
| (Typed or printed name of signee)  |

Filing Fee: \$25.00