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(Re	equestor's Name)			
(, 4400101 0 1 141110,			
	ldress)			
(A0	idless)			
(Address)				
(Cir	ty/State/Zip/Phone	e #)		
				
☐ PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
<u></u>				
Special Instructions to Filing Officer:				





200289355242

08/31/16--01024--011 **25.00

SEP 0 6 2016 S. YOUNG TALLANASSEE HOOMS



August 25, 2016

VIA CERTIFIED MAIL

Florida Department of State Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

Re: Withdrawal of a Foreign Limited Liability Company

Dear Sir or Madam:

Transmitted herewith on behalf of TNCI Operating Company, LLC, please find the following required documents:

- 1. Notice of Withdrawal of Certificate of Authority
- 2. Payment of \$25.00 (Check number 516828)

Enclosed please find an extra copy of the Application to be stamped and returned to sender upon completion. Also enclosed is a self-addressed stamped envelope for your convenience.

Thank you for your attention to this matter. If you have any questions, please contact Alex Valencia at (972) 910-1720, avalencia@impacttelecom.com or at the Company's principal address indicated below.

Respectfully submitted,

Mary Hope
Mary Hope

Regulatory Analyst

Enclosures

cc: Alex Valencia

VP, Government Affairs and Compliance

COVER LETTER

	istration Section ision of Corporations		
SUBJECT:	TNCI OPERATING COMP	PANY LLC	
	(Name of For	reign Limited Liability (Company)
Dear Sir or N	/ladam:		
The enclosed	l withdrawal and fee(s) are submitte	d for filing.	
Please return	all correspondence concerning this	matter to the following	:
Alex Vale	ncia		
	(Name of Person)		•
TNC1 Imp	eact, LLC		
	(Firm/Company)		
433 E. La	s Colinas Blvd., Suite 500		
	(Address)		•
Irving, TX	75039	·	
	(City/State and Zip Cod	e)	•
For further in	nformation concerning this matter, p	lease call:	
Alex Vale	ncia	972 at (910-1720
	(Name of Person)		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:		
\$25 Filing	Fee \$30 Filing Fee & Certificate of Status	2 \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

TNCI OPERATING COMPANY LLC	
(Name of limited liability company)	
DELAWARE	
(Jurisdiction of its organization)	
2/22/2013	± 29
(Date registered with Florida Department of State)	
M13000001170	和63
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	PH 3: 10:
Signature of authorized representative)	56
Brian McClintock	

(Typed or printed name of signee)

Filing Fee: \$25.00