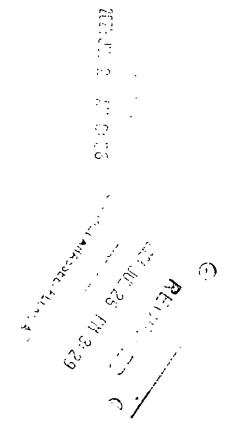
## M18000000 27560

(1	Requestor's Name)
	Address
()	Address)
	Address)
(1	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
<u> </u>	
(1	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status
•	
Special Instructions to F	iling Officer:
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	J. HORNE JUL 29 2024
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To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 07/26/24 Order #: 1576792-1

Re: Broadsoft Contact Center LLC

Processing Method: Routine

## TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Withdrawal

Amount to be deducted from our State Account: \$25.0 - FL State Account Number: 12000000195

Please take the following action: File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

## **COVER LETTER**

_	of Corporations		
Broa	dSoft Contact Center LLC		
30b0LC1	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Madan	n:		
The enclosed with	drawal and fee(s) are submitte	ed for filing.	
Please return all co	rrespondence concerning this	matter to the followin	g:
Tannalee Kenda	II		
	(Name of Person)		_
Cisco Systems, I	nc.		
	(Firm/Company)		_
170 West Tasma	ın Drive		
	(Address)	<u> </u>	_
San Jose, CA 95	134		
	(City/State and Zip Coo	le)	_
For further informa	ution concerning this matter, p	olease call:	
Tannalee Kenda	II	415 at (	886-5153
(	Name of Person)		& Daytime Telephone Number)
Division P.O. Bo:	tion Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a chec	k for the following amount:		
■\$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

BroadSoft Contact Center LLC	
(Name of limited liability company)	
Delaware	
(Jurisdiction of its organization)	
March 20, 2018	
(Date registered with Florida Department of State)	<u>.</u> 
M18000002756	Gi.
(Florida Document Number)	<del></del>
This limited liability company is withdrawing its certificate of authority in this state.  Effective Date, if other than the date of filing:(option	ය. ය
Effective Date, if other than the date of filing:	al) <u>역</u> or
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requires this date will not be listed as the document's effective date on the Department of State's re	
(Signature of authorized representative)	
Evan Sloves  (Typed or printed name of signee)	

WD-7805

Filing Fee: \$25.00