Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190000264073)))

Electronic Filing Cover Sheet



H190000264073ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

LLC DISSOLUTION OR WITHDRAWAL MCI SERVICE PARTS, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25,00 |

Electronic Filing Menu Corporate Filing Menu

Help

EXAMINER

| MCI SERVICE PARTS, ELC | | | |
|---|---|------------------------------------|--|
| (Name of limited liability company) | • | | |
| Delaware | | | |
| (Jurisdiction of its organization) | | | |
| December 19, 2018 | | | |
| (Date registered with Florida Department of State) | | | |
| M18000011560 | | | |
| (Florida Document Number) | | | |
| This limited liability company is withdrawing its certificate of authority in this state. | | | |
| (If an effective date is listed, the date must be specific and cannot be prior to date of more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing re | quireme | ents, | |
| (Signature of aythorized representative) | e's teco | ੂੰ ²⁰¹⁹ JAH 23 AM 9: 45 | |
| (Typed or printed name of signee) | ** | Ch | |