

P12902

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

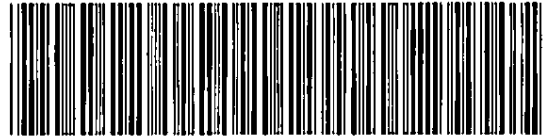
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

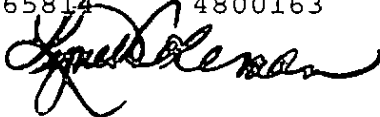
RECEIVED  
18 NOV -2 AM 10:49  
STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Withdrawal

NOV 05 2018  
ALBRITTON

TA

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 465814 4800163  
AUTHORIZATION :   
COST LIMIT : \$ 35.00

ORDER DATE : October 31, 2018  
ORDER TIME : 9:50 AM  
ORDER NO. : 465814-120  
CUSTOMER NO: 4800163

FOREIGN FILINGS

NAME: ANDREW SYSTEMS INC.

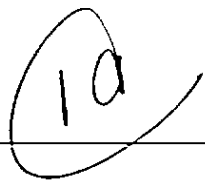
XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER: 

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF  
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

Andrew Systems Inc.

\_\_\_\_\_  
(Name of Corporation)

P12902

\_\_\_\_\_  
(Document Number of Corporation (if known))

Delaware

\_\_\_\_\_  
(Incorporated Under Laws of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

1100 CommScope Place SE

\_\_\_\_\_  
(Mailing Address)

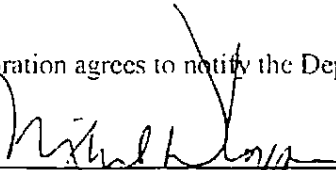
Hickory, NC 28602

\_\_\_\_\_  
(City/ State /Zip)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

  
\_\_\_\_\_  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

10/31/2018

\_\_\_\_\_  
(Date)

Michael D. Coppin

\_\_\_\_\_  
(Typed or printed name of person signing)

Vice President and Assistant Secretary

\_\_\_\_\_  
(Title of person signing)

**FILING FEE \$35**