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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

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: (850)878-5368



DISSOLUTION OR WITHDRAWAL SYMBOL TECHNOLOGIES, INC.

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COVER LETTER

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TO: Amendment Section Division of Corporations		
SUBJECT: Symbol Technologies, Inc.		
(Name of Corporation)		
2000 C		
DOCUMENT NUMBER: 1209 15		
The enclosed withdrawal application and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Kathleen M. Amato		
(Name of Person)		
Zebra Technologies Corporation		
(Firm/Company)		
3 Overlook Point		
(Address)		
Lincolnshire, IL 60069		
(City/State and Zip code)		
For further information concerning this matter, please call:		
Kathleen M. Amato at (847) 955-4620		
(Name of Person) (Area Code & Daytime Tell Enclosed is a check for the amount:	ephone Number)	
• •	g Fee, of Status & Certified itional copy is enclosed)	
MAILING ADDRESS: STREET ADD		
Amendment Section Amendment Sec Division of Corporations Division of Corp		
P.O. Box 6327 2661 Executive		
Tallahassee, FL.32314 Tallahassee, FL.	. 32301	

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

Symbol Technologies, Inc.
(Name of Corporation)

P20975	
(Document Number of Corporation	(if known)
Delaware	
(Incorporated Under Laws	of)
This corporation is no longer transacting business or conducting a voluntarily surrenders its authority to transact business or conduct	
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of proce the time it was authorized to transact business or conduct affairs in	ss based on a cause of action arising during
The following is a current mailing address for the corporation:	
c/o Zebra Technologies Corporatio	on, 3 Overlook Point,
Lincolnshire, IL 60069, Attn: C	Seneral Counsel
The corporation agrees to notify the Department of State in the fut	
(Signature of a directer, president or other officer - if in the hands of a	June <u>3</u> , 2015
receiver or other court appointed fiductary, by that fiduciary)	₩
Derek Spychalski	Vice President ੀ ਯ
(Typed or printed name of person signing)	(Title of person signing)
FILING FEE \$35	4-8 AM 7: 18 AAN OF STATE ASSEE, FLEREDA