000001353

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(Address)		
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PICK-UP V	VAIT MAIL	
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C. GOLDEN JUN 28 2017

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

ACCOUNT NO. : I2000000195

REFERENCE: 695921 4354838

AUTHORIZATION - MINISTER OF THE STATE OF THE

COST LIMIT : \$ 35.00

ORDER DATE: June 22, 2017

ORDER TIME : 3:30 PM

ORDER NO. : 695921-035

CUSTOMER NO: 4354838

FOREIGN FILINGS

NAME: HITACHI ALOKA MEDICAL AMERICA,

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: Melissa Zender - EXT#

EXAMINER:

COVER LETTER

	mendment Section ivision of Corporations
SUBJEC	
190190150	(Name of Corporation)
DOCUM	IENT NUMBER:
The enclo	osed withdrawal application and fee are submitted for filing.
	turn all correspondence concerning this the following:
	RICHARD KURZ (Name of Person)
•	(Name of Person)
_	HITACHI HEALTCARE AMERICAS (Firm/Company)
	(Firm/Company)
	1959 Symmit Commerce PALIC (Address)
	(Address)
_	Twinshum 0/4 44087 (City/State and Zip code)
	(City/State and Zip code)
For furthe	er information concerning this matter, please call:
	(Name of Person) at (800) 906 3766 v 5657 (Name of Person) (Area Code & Daytime Telephone Number) is a check for the amount:
\$35 Fi	ling Fee \$\int \\$43.75 \ Filing Fee & \$\int \\$43.75 \ Filing Fee & \$\int \\$52.50 \ Filing Fee, Certificate of Status & Certified Copy (Additional copy is Enclosed) \$\int \\$852.50 \ Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	MAILING ADDRESS: STREET ADDRESS: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL.32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL. 32301

2661 Executive Center Circle

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

Hitachi Aloka Medical America, Inc.

(Name of Corporation	on)	
F14000001353		
(Document Number of Corporati	ion (if known)	
Delaware		
(Incorporated Under La	ws of)	
This corporation is no longer transacting business or conductin voluntarily surrenders its authority to transact business or conductions.	ng affairs within the State of Florida and act affairs in Florida.	l hereby
This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of prothe time it was authorized to transact business or conduct affairs	ocess based on a cause of action arising	nalf and g during
The following is a current mailing address for the corporation:	11 1 24 21	HT JUN
10 Fairfield Blvd.		FILED 127 A
(Mailing Address)	(1) (1) (1) (1) (2) (1) (2)	FILED JUN 27 AM 8: 3
Wallingford, CT 06492 (City/ State /Zip)		9: 32 12
The corporation agrees to notify the Department of State in the	future of any change in its mailing addre	ess.
Princey inclined moreum compension, so, Dy mercy or Huisin Mace from so,	5 20 2017	
(Signature of a director, type ident or other officer - If in the hands of a receiver or other court appointed fiduciary) by that fiduciary)	(Date)	
Richard S. Katz	Secretary	
(Typed or printed name of person signing)	(fitle of person signing)	

FILING FEE \$35