

F/4000001751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

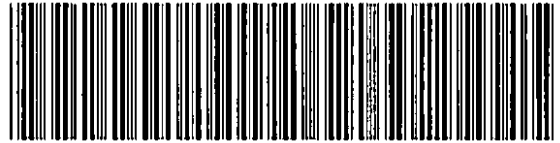
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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700422983757

Withdrawal

0.000000 0.000000 0.000000 \*70.00

2024 FEB -6 PM 12:07

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RECEIVED  
2024 FEB -6 PM 3:27  
TALLAHASSEE, FLORIDA

A. RAMSEY

FEB -7. 2024

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

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**CERTIFIED COPY** \_\_\_\_\_

**XX PHOTOCOPY** \_\_\_\_\_

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**WITHDRAWL** \_\_\_\_\_

- 1. **FIRST BIOMEDICAL, INC**  
(CORPORATE NAME AND DOCUMENT #)
- 2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
- 3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
- 4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
- 5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
- 6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** FIRST BIOMEDICAL, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** F14000001751

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheryl Duren, Paralegal  
(Name of Person)

Stinson LLP  
(Firm/Company)

1201 Walnut Street, Suite 2900  
(Address)

Kansas City, MO 64106  
(City/State and Zip code)

For further information concerning this matter, please call:

Cheryl Duren at ( 816 ) 691-2664  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)
- \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

FIRST BIOMEDICAL, INC.

(Name of Corporation)

F14000001751

(Document Number of Corporation (if known))

Kansas

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

FILED  
2024 FEB - 8 PM 12 07  
STATE OF FLORIDA  
TALLAHASSEE

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:

3851 West Hamlin Road

(Mailing Address)

Rochester Hills, MI 48309

(City/ State /Zip)

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

DocuSigned by:

*Barry Steele*

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

02/02/2024

(Date)

Barry Steele

(Typed or printed name of person signing)

Secretary

(Title of person signing)

**FILING FEE \$35**