

F14000001359

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850)205-8842
Fax Number : (850)878-5368

DISSOLUTION OR WITHDRAWAL
PHARMACYCLICS, INC.

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$35.00 |

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

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JUL 1 2015

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pharmacyclics, Inc.
(Name of Corporation)

DOCUMENT NUMBER: F1400001359

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Autumn Anderson
(Name of Person)

Abbie Inc.
(Firm/Company)

1 N. Waukegan Road
(Address)

North Chicago, IL 60064
(City/State and Zip code)

For further information concerning this matter, please call:

Autumn Anderson at (847) 930-6267
(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
2661 Executive Center Circle
Tallahassee, FL. 32301

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 JUN 30 AM 10: 22

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

Pharmacyclica, Inc.
(Name of Corporation)

F14000001359
(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:

Attn: Tax Department | N Waukegan Road, AP 34-2
(Mailing Address)

North Chicago, IL 60064
(City/ State /Zip)

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)

William J. Chase
(Typed or printed name of person signing)

6/29/15
(Date)

Manager of Pharmacyclica LLC (d/b/a Oxford Amberst LLC), Successor in Interest to Pharmacyclica, Inc.
(Title of person signing)

FILING FEE \$35