816312

Office Use Only



700042757837

11/22/04--01030--030 **35.00

OL NOV 22 AM 11: 45
SECRE FARY CHISTAIL
SECRE FARY CHISTAIL

WithDR

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PE CORPORATION (NY)
(Name of corporation)
DOCUMENT NUMBER:
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DANIELLE ALGIERE
(Name of Person)
APPLERA CORPORATION
(Firm/Company)
301 MERRITT 7, P.O. BOX 5435
(Address)
NORWALK, CT 06856
(City/State and Zip code)
For further information concerning this matter, please call:
DANIELLE ALGIERE (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS: MAILING ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL. 32399

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

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

PE CORPORATION (NY)

	(Name of Corporation)
	(Name of Corporation) (Document Number of Corporation (if known)
	(Document Number of Corporation (if known)
	(Incorporated Under Laws of)
OC1. !-	the three terms of the second control of the
	rporation is no longer transacting business or conducting affairs within the State of Florida and hereby
voluntai	rily surrenders its authority to transact business or conduct affairs in Florida.
This co	rporation revokes the authority of its registered agent in Florida to accept service on its behalf and
appoints	s the Department of State as its agent for service of process based on a cause of action arising during the
	vas authorized to transact business or conduct affairs in Florida.
	THE WORLD TO COLLEGE TO COLLEGE TO THE TOTAL T
The fall	auring is a surrent mailing address for the corporation.
The ton	owing is a current mailing address for the corporation:
	P.O. BOX 5435
	(Mailing Address)
	NORWALK, CT 06856
	(City/ State /Zip)
The con	poration agrees to notify the Department of State in the future of any change in its mailing address.
	$(\mathcal{A} \circ \mathcal{A} \circ \mathcal{A})$
	Coled about
(Signature of a director, president or other officer - if in the hands of a (Date) receiver or other court appointed fiduciary, by that fiduciary)
	receiver of other court appointed reductary, by that reductary)
JOHN S	G. OSTASZEWSKI TREASURER
	(Typed or printed name of person signing) (Title of person signing)

FILING FEE \$35