

F000000001452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

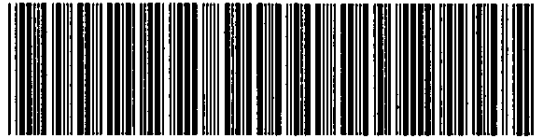
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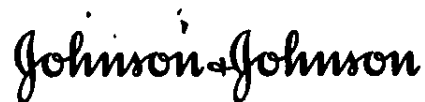
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08 JAN -3 AM 10:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Roberts JAN 08 2008



Steven M. Rosenberg  
Secretary

(732) 524-2018  
(732) 524-2185 FAX

One Johnson & Johnson Plaza  
New Brunswick, NJ 08933  
Telephone: (732) 524-2452  
Fax: (732) 524-2185

December 26, 2007

Certified Mail, Return Receipt Requested

Secretary of State  
Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

RE: Medix Pharmaceuticals Americas, Inc.


Dear Sir/Madam:

Enclosed herewith please find the original Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida. Also enclosed please find a check in the amount of \$35.00.

Kindly file and return a letter of acknowledgement and certificate of status/withdrawal to me in the envelope enclosed for your convenience.

Thank you.

Very truly yours,

  
Linda King  
Corporate Governance and  
Records Administrator

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

Medix Pharmaceuticals Americas, Inc.

(Name of Corporation)

F00000001452

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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:

One Johnson & Johnson Plaza, WH-2133

(Mailing Address)

New Brunswick, New Jersey 08933

(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)

John T. Crisan

(Typed or printed name of person signing)

DECEMBER 21, 2007

(Date)

Secretary

(Title of person signing)

**FILING FEE \$35**