F01000004800

| (Requestor's Name) | • |
|---|---|
| (Address) | |
| (Address) | ٠ |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
| | |
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O4 JUL 19 PH 4: 30
SECTABLE OF LANDA
PALLAHASSEE, FLORIDA



Jessica J. Pearl Paralegal

PerkinElmer, Inc. 45 William Street Wellesley, MA 02481-4008 T: 781-431-4272 F: 781-431-4115 jessica.pearl@perkinelmer.com

July 15, 2004

VIA UPS NEXT DAY AIR SAVER

Florida Department of State Amendment Section Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

> RE: PerkinElmer Labworks, Inc. Application for Withdrawal F000004800

OF JUL 19 PM 1: 30

Dear Sir or Madam:

Please be advised that the abovementioned entity has merged out of existence, effective June 28, 2004. Accordingly, enclosed please find an Application for Withdrawal of Authority to Transact Business and check number 56997 in the amount of thirty-five dollars and zero cents (\$35.00) payable to the Florida Department of State for the applicable filing fee. Kindly return a "filed" stamp copy, copy enclosed for your convenience, of the completed filing to my attention in the enclosed self-addressed stamped envelope. Thank you.

Please direct any and all correspondence with respect to this matter or corporation to the attention of Ms. Jessica J. Pearl at the abovementioned address for prompt and proper handling. Thank you in advance for your cooperation in this matter.

If you have any questions or concerns please do not hesitate to contact the undersigned; please find my particulars above.

Kind Regards,

Jessica J. Pearl Paralegal

Enclosures

TRANSMITTAL LETTER

| TO: Amendment Section | |
|---|--|
| Division of Corporations | |
| SUBJECT: PerkinElmer Labworks, Inc. | |
| | me of corporation) |
| 7010000000 | - |
| DOCUMENT NUMBER: F010000048 | 00 |
| The enclosed withdrawal application an | nd fee are submitted for filing. |
| Please return all correspondence concerni | ing this |
| matter to the following: | |
| | |
| Ms. Jessica J. Pearl | E T |
| (Name of Person) | Of JUL 19 PM 4: 30 FILL AHASSEE, FLORIDA |
| | issi P |
| PerkinElmer, Inc. | <u></u> |
| (Firm/Company) | Tu to |
| | 921 30 |
| 45 William Street | |
| (Address) | |
| Wellesley, MA 02481~4008 | |
| (City/State and Zip code) | |
| (3.13), 2.11.0 11.12 2.19 0000) | |
| For further information concerning this m | natter, please call: |
| Jessica J. Pearl | at (781) 431-4272 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| | |
| STREET ADDRESS: | MAILING ADDRESS: |
| Amendment Section | Amendment Section |
| Division of Corporations | Division of Corporations |
| 409 E. Gaines St. | P.O. Box 6327 |
| Tallahassee, FL. 32399 | Tallahassee, FL. 32314 |

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

| PerkinElmer Labworks, Inc. |
|---|
| (Name of Corporation) |
| 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: |
| PerkinElmer, Inc., 45 William Street |
| (Mailing Address) |
| |
| Wellcsley, MA 02481-4008 |
| : (City/ State /Zip) |
| |
| The corporation agrees to notify the Department of State in the future of any change in its mailing address. |
| Asst. Secretary |
| Signature of the chairman or vice chairman of the board, president or any officer, or if the corporation is in the hands of a received, trustee, or other court-appointed fiduciary, by that fiduciary. |
| John L. Healy Typed or printed name July 12, 2004 Date |
| |
| ASSEE, |
| |
| HASSEE, FLORIDA |
| |