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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CELL THERAPEUTICS, INC. (Name of Corporation)
DOCUMENT NUMBER: FO1000004848
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Louis A. BIANCO
(Name of Person)
CELL THERAPEUTICS INC
(Firm/Company)
501 ELLIOTT AVE W STE. 400
(Address)
SEATTLE WA 98119
(City/State and Zip code)
For further information concerning this matter, please call:
Jill Hofstrann at (206) 272-4629 (Name of Person) (Area Code & Daytime Telephone Number)
(Mea Code & Daytine Telephone Number)

STREET ADDRESS:

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

MAILING ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

	Ceu 7	HERA PEUT	ics Inc	r .		1 P. C.	知り
 		(Name	of Corporatio	n)		WHY.	i in
	F0100	Document Number	18 er of Corporati	on (if known)	***************************************	ALL MO
	WASHIA	(Incorpora	nted Under Lav	ws of)			· ·
This corporation is r voluntarily surrender						e of Florida a	nd hereby
This corporation revappoints the Department it was authorized	nent of State as i	ts agent for ser	vice of proce	ess based or			
The following is a cu	ırrent mailing ad	dress for the co	orporation:				
S	oi Euro	TT AVE	ى (iling Address	Suite	400		-
	EATTLE	<u>الم</u> (Cit	9811. y/ State /Zip)	ີ່			-
receiver or othe	rector, president or our	Cen Frofficer - if in the	hands of a	uture of any	change in it	s mailing add	
14 4/24/06 Lou (Typed o	S A. B	VANCO con signing)			CFO (Title of po	erson signing)	