# F02000001420

(Re	questor's Name)	
(10	4400001011477707	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	,
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#### **COVER LETTER**

TO:	Amendment Section Division of Corporation	ons				
SUBJ	ECT: Kelson Billing Serv	ices of Florida,	Inc.			
	(Name of Corporation)					
DOC	UMENT NUMBER: _					
The en	nclosed withdrawal app	olication and	fee are submitted t	for filing.		
	e return all corresponden to the following:	ce concernii	ng this			
<b>5</b>	Gay Jeffs					
			(Name of Person	)		
	Kelson Physician Partner	s, Inc.				
			(Firm/Company			
	3300 S. Parker Road, Sui	te 500				
	·		(Address)			
	Aurora	со	80014			
	-	(	City/State and Zip of	code)		
For fu	rther information concer	rning this ma	atter, please call:			
Gay Jef	fs		at (303	) 751-3501		
	(Name of Perso	on)	(Area Code & Daytime 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

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

Kelson Billing Services of Florida, Inc.

(Name of Corporation)	•		
F92000010 (Document Number of Corporation		OT FEB 15 PM 12: 06	FILED
(Incorporated Under Laws		STATE LORIDA	
This corporation is no longer transacting business or conducting a voluntarily surrenders its authority to transact business or conduct a	affairs in Florida.		
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Flo	based on a cause of action		
The following is a current mailing address for the corporation:			
3300 S. Parker Road, Suite325 (Mailing Address)	· ·		
Aurora, CO 80014		<del></del>	
(City/ State /Zip)  The corporation agrees to notify the Department of State in the future of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	ure of any change in its mai  2/12/07  (Date)	ling address	<b>.</b>
D. Mark FitzHarris (Typed or printed name of person signing)	President (Title of person si	gning)	

FILING FEE \$35