F0200005653

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number) :		
Certified Copies	_ Certificates	s of Status
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SEURETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

	Amendment Section Division of Corporations			
SUBJECT: BAPS Medical Services, Inc.				
(Name of Corporation)				
DOCUM	MENT NUMBER: F0200000	05653		
The encl	osed withdrawal application and	d fee are submitted for filing.		
	eturn all correspondence concerning the following:	ng this		
		Salil Solanki		
	(Name of Person)			
	BAPS Medical Services, Inc.			
	(Firm/Company)			
	81 Suttons Lane			
	(Address)			
	Piscataway, New Jersey 08854-5723			
(City/State and Zip code)				
For further information concerning this matter, please call:				
	Salil Solanki	_{at(} 732 ₎ 777-1414 Ext. 112		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
	MAILING ADDRESS: Amendment Section Division of Corporations	STREET ADDRESS: Amendment Section Division of Corporations		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



September 14, 2009

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

Re: Application for Withdrawal of Authority to Transact Business in Florida

Dear Sir or Madam,

BAPS Medical Services, Inc is a nonprofit corporation, registered with the State of Florida having document number F02000005653.

We are submitting herewith the application by foreign corporation for withdrawal of authority to transact business or conduct affairs in Florida.

We are enclosing the following documents:

- 1. Cover Letter
- 2. Application for Withdrawal of Authority to Transact Business in Florida
- 3. Filing fees \$35.00 via check # 200 dated 9.9.09 payable to "Florida Department of State".

Should you have any questions, please feel free to call me at (732) 777-1414 Ext: 112.

Thanking you,

Sincerely,

Salil Solanki Corporate Affairs

Enclosures

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

	<u> </u>		
BAPS Medical Service	es, Inc.		
(Name of Corporation)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 		
F02000005653	(if known) 8 AN 10: 52		
(Document Number of Corporation	(if known)		
Texas (Incorporated Under Laws	O,		
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conduct. 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 Floring in the corporation of the conduct affairs in Floring in the corporation is not longer transacting business or conduct agent in the 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 Floring in the 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 Floring in the Corporation revokes the authority of its registered agent in the corporation revokes the authority of its registered agent in the corporation revokes the authority of its registered agent in the corporation revokes the authority of its registered agent in the corporation revokes the corporation revokes the authority of its registered agent in the corporation revokes the corporat	affairs in Florida. Florida to accept service on its behalf and s based on a cause of action arising during the		
The following is a current mailing address for the corporation:			
81 Suttons Lane	•		
(Mailing Address)			
Piscataway, New Jersey 08854-5723			
(City/ State /Zip)			
The corporation agrees to notify the Department of State in the fut (Signature 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 mailing address. 9 8 2 00 9 (Date)		
Harshad Patel	Vice President		
(Typed or printed name of person signing)	(Title of person signing)		

FILING FEE \$35