

FD300000/531

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

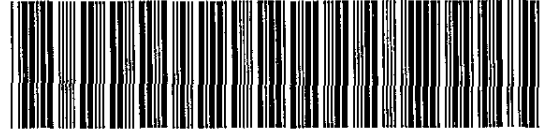
(Business Entity Name)

(Document Number)

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RECEIVED  
03 DEC -2 AM 11:19  
DIVISION OF CORPORATION  
TALLAHASSEE, FLOR  
FILED  
03 DEC -2 PM 3:37  
SECRETARY OF STATE

G. Ouellette DEC 02 2003

**CT CORPORATION**

December 2, 2003

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

Re: Order #: 5987828 WO  
Customer Reference 1: Novare  
Customer Reference 2: Novare Withdrawal-Variou

Dear Secretary of State, Florida:

Please file the attached:

Novare Surgical Systems, Inc. (DE)  
Withdrawal  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell  
Fulfillment Specialist  
Ashley\_Mitchell@cch-lis.com

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

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

Novare Surgical Systems, 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:

10231 Bubb Road


(Mailing Address)

Cupertino, CA 95014

(City/ State /Zip)

FILED  
03 DEC -2 PM 3:37  
SECRETARY OF STATE  
TALLAHASSEE, FL 09107

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

  
Signature of the chairman or vice chairman of the board,  
president, or any officer, or if the corporation is in the hands of a  
receiver, trustee, or other court-appointed fiduciary, by that fiduciary

President

Title

Kermit R. Pope, Jr.

Typed or printed name

11/14/03

Date