

7/16/14

FLORIDA DIVISION OF CORPORATIONS

3:32 PM

**F03000005322**  
PUBLIC ACCESS SYSTEM  
ELECTRONIC FILING COVER SHEET  
(((H14000059265 3)))

TO: DIVISION OF CORPORATIONS

FAX #: (850) 922-4000

FROM: C T CORPORATION SYSTEM  
CONTACT: KATHY KELLERHALS  
PHONE: (850) 222-1092

ACCT#: FCA000000023

FAX #: (850) 878-5368

NAME: SYMPHONY DIAGNOSTIC SERVICES NO. 1, INC.

AUDIT NUMBER.....H14000059265

DOC TYPE.....DISSOLUTION

CERT. OF STATUS..0

PAGES..... 3

CERT. COPIES.....0

DEL.METHOD.. FAX

EST.CHARGE.. \$35.00

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

\*\* ENTER 'M' FOR MENU. \*\*

ENTER SELECTION AND CR:

**FILED**  
**Mar 11, 2014 08:00 AM**  
**Secretary of State**

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Symphony Diagnostic Services No. 1, Inc.  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_  
(Name of Person) at (\_\_\_\_\_) \_\_\_\_\_  
(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

**FILED**  
**Mar 11, 2014 08:00 AM**  
**Secretary of State**

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

Symphony Diagnostic Services No. 1, Inc

(Name of limited liability company)

California

(Jurisdiction of its organization)

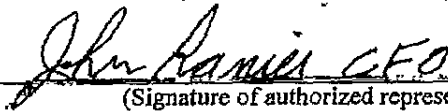
10/24/2003

(Date registered with Florida Department of State)

F03000005322

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

John Lanier

(Typed or printed name of signee)

**Filing Fee: \$25.00**