

FILED

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 779800 7395619

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : August 22, 2017

ORDER TIME : 9:18 AM

ORDER NO. : 779800-150

CUSTOMER NO: 7395619

FOREIGN FILINGS

NAME: IMPAC MEDICAL SYSTEMS, INC.

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER: \_\_\_\_\_

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

IMPAC Medical Systems, Inc.

\_\_\_\_\_  
(Name of Corporation)

F04000001241

\_\_\_\_\_  
(Document Number of Corporation (if known))

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:

c/o Elekta, 400 Perimeter Center Terrace, Suite 50


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

Atlanta, GA 30346

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

FILED  
AUG 25 AM 9:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Garth R. Andrews

\_\_\_\_\_  
(Typed or printed name of person signing)

Aug. 16, 2017

\_\_\_\_\_  
(Date)

President

\_\_\_\_\_  
(Title of person signing)

**FILING FEE \$35**