## F040000004425

Requestor's Name)	)	
Address)		
Address)		
City/State/Zip/Phor	ne #)	
☐ WAIT	MAIL	
Business Entity Na	me)	
(Document Number)		
Certificate	es of Status	
Special Instructions to Filing Officer:		
	Address)  Address)  City/State/Zip/Phor  WAIT  Business Entity Na  Document Number  Certificate	

Office Use Only



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IVISIEN OF CORPERATION

JUL 23 2015

C LEWIS

## **COVER LETTER**

•		
TO: Amendment Section		
Division of Corporations		
SUBJECT: Oncura, Inc.		
	(Name of Corporation	1)
DOCUMENT NUMBER: F0400	0004425	
The enclosed withdrawal application ar	nd fee are submitted for fil	ing.
Please return all correspondence concernmenter to the following:	ing this	
Ann-Marie McElli	gott	
	(Name of Person)	
GE Corporate		
	(Firm/Company)	
12 Corporate Wo	ods Blvd.	
<del> </del>	(Address)	
Albany, NY 1221	1	
<del></del>	(City/State and Zip code)	
For further information concerning this n	natter, please call:	
Heather Fyfe	<sub>at (</sub> 518 <sub>)</sub> 4	33-4459
(Name of Person) Enclosed is a check for the amount:		e & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Statu		\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle

Tallahassee, FL. 32301

Tallahassee, FL.32314

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

Oncura, Inc.	
(Name of Corporation)	)
F04000004425	
(Document Number of Corporation	n (if known)
Delaware	
(Incorporated Under Laws	s of)
s corporation is no longer transacting business or conducting antarily surrenders its authority to transact business or conduct is corporation revokes the authority of its registered agent in oints the Department of State as its agent for service of proc	et affairs in Florida. In Florida to accept service on its behalf ar
time it was authorized to transact business or conduct affairs i	
following is a current mailing address for the corporation:	2 JUL S
PO Box. 2216	JUL 20
(Mailing Address)	AM II: 28
Schenectady NY 12301	- 28
(City/ State /Zip)	
corporation agrees to notify the Department of State in the fu	utura of any change in its mailing address
M Amm & L	iture of any change in its maning address.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Ann-Marie McElligott	VP & Asst. Treasurer
(Typed or printed name of person signing)	(Title of person signing)