

**F08000005390**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

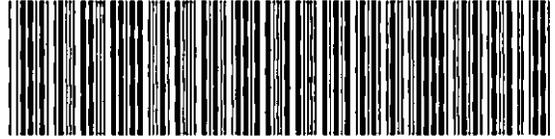
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

2020 NOV -5 AM 8:59

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TALLAHASSEE, FLORIDA

2020 NOV -5 PM 2:27

RECEIVED

NOV 0 2020

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

ACCOUNT NO. : I20000000195  
REFERENCE : 498063 7656375  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 35.00

ORDER DATE : November 4, 2020  
ORDER TIME : 1:19 PM  
ORDER NO. : 498063-030  
CUSTOMER NO: 7656375

FOREIGN FILINGS

NAME: RESPIRONICS, INC.

CORPORATE  
 LIMITED PARTNERSHIP  
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
 PLAIN STAMPED COPY  
 CERTIFICATE OF STATUS

CONTACT PERSON: Amanda Robinson - EXT# 62968

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

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Respironics, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** F08000005390

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Irma I. Gomez  
(Name of Person)

Philips North America  
(Firm/Company)

222 Jacobs Street  
(Address)

Cambridge, MA 02141  
(City/State and Zip code)

For further information concerning this matter, please call:

Irma I. Gomez at ( 617 ) 245-5539  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)
- \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL.32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL. 32301

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

Respironics, Inc.

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

F08000005390

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

Delaware

12/23/2008

\_\_\_\_\_  
(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:

6501 Living Place

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

Pittsburgh, PA 15206

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

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DEPARTMENT OF STATE  
TALLAHASSEE, FL

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)

11/2/20

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

Eric Pauls

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

Vice President

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

**FILING FEE \$35**