Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000218853 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

DISSOLUTION OR WITHDRAWAL **HOSPITAL BUILDING & EQUIPMENT COMPANY**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

10/5/2010

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: HBE Corporation
	(Name of Corporation)
DOC	UMENT NUMBER: F09000000959
The e	nclosed withdrawal application and fee are submitted for filing.
	e return all correspondence concerning this r to the following:
	(Name of Person)
	(Firm/Company)
	(Address)
	(City/State and Zip code)
For fu	urther information concerning this matter, please call:
	at (
	(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

MAILING ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

المناجب

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

Hospital Building & Equipment Company d/b/a HBE Corporation

Formonore		
F09000000959	(Document Number of Corporation (if known)	
Delaware	(Incorporated Under Laws of)	W.A
	(motiporada duca zawa st)	
	transacting business or conducting affairs within tority to transact business or conduct affairs in Flori	
ppoints the Department of St	authority of its registered agent in Florida to ac ate as its agent for service of process based on a ca act business or conduct affairs in Florida.	
The following is a current mail	ling address for the corporation:	
11330 Olive Blvd.		THE STATE
11330 Olive Blvd.	(Mailing Address)	-5
11330 Olive Blvd. St. Lavis, MO 63141		5
	(Mailing Address) (City/ State /Zip)	5
St. Louis, MO 63141	(City/ State /Zip)	1-5 PH 2: uu
St. Louis, MO 63141	(City/ State /Zip) fy the Department of State in the future of any char	onge in its mailing address.
St. Louis, MO 63141 The corporation agrees to notif	(City/ State /Zip) fy the Department of State in the future of any char	1-5 PH 2: uu

FILING FEE \$35