

F100000003618

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

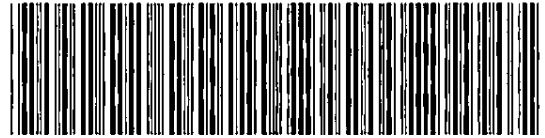
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer.

Office Use Only



200304457102

RECEIVED  
17 NOV 15 AM 11:12

2007 NOV 15 PM 12:04

1011 10

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

2017 NOV 15 PM 12:00

ACCOUNT NO. : I20000000195

REFERENCE : 914954 7855288

AUTHORIZATION

COST LIMIT : \$35.00

*[Handwritten Signature]*

ORDER DATE : November 14, 2017

ORDER TIME : 10:05 AM

ORDER NO. : 914954-005

CUSTOMER NO: 7855288

FOREIGN FILINGS

NAME: SYNERTX 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: Roxanne Turner - EXT#

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

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Withdrawal of a Foreign Corporation transacting business in Florida  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** Synertx Inc.  
\_\_\_\_\_

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

Please return all correspondence concerning this  
matter to the following:

Timothy Recht  
\_\_\_\_\_

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

Synertx Inc.,  
\_\_\_\_\_

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

7540 N 19th Avenue, Suite 200  
\_\_\_\_\_

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

Phoenix, AZ 85021-7967  
\_\_\_\_\_

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

For further information concerning this matter, please call:

Timothy Recht, Accounting Manager  
\_\_\_\_\_

at ( 888 ) 873-4221 Ext 516  
\_\_\_\_\_

\_\_\_\_\_  
(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

2017 NOV 15 PM 12:00

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

Synertx Inc

(Name of Corporation)

(Document Number of Corporation (if known))

Arizona

(Incorporated Under Laws of)

RECEIVED  
NOV 15 PM 12:00  
2017

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:

7540 N 19th Avenue, Suite 200

(Mailing Address)

Phoenix, AZ 85021-7967

(City/ State /Zip)

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)

11/14/2017

(Date)

Rod Hatch

(Typed or printed name of person signing)

President and CEO

(Title of person signing)

**FILING FEE \$35**