

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

ACCOUNT NO. : I20000000195
REFERENCE : 716298 4392992
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 35.00

ORDER DATE : July 10, 2017
ORDER TIME : 4:05 PM
ORDER NO. : 716298-005
CUSTOMER NO: 4392992

FOREIGN FILINGS

NAME: CASCADE MEDICAL SUPPLY 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: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Cascade Medical Supply
(Name of Corporation)

DOCUMENT NUMBER: F12000000689

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

Please return all correspondence concerning this
matter to the following:

Ginny Eden, Legal Specialist
(Name of Person)

McKesson Corporation
(Firm/Company)

2 National Data Plaza NE
(Address)

Atlanta, GA 30329
(City/State and Zip code)

For further information concerning this matter, please call:

Ginny Eden, Legal Specialist at (404) 461-5235
(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

Cascade Medical Supply Inc.

(Name of Corporation)

F12000000689

(Document Number of Corporation (if known))

Washington

(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:

One Post Street

(Mailing Address)

San Francisco, CA 94104

(City/ State /Zip)

FILED
17 JUN 10 AM 9:53
TALLAHASSEE, FLORIDA

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

Karen M. Pineda

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

05/05/2017

(Date)

Karen M. Pineda

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

FILING FEE \$35