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TALLAHASSEE, FLORIDA

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CLERK OF SUPERIOR COURT
DIVISION OF REVENUE OFFICE
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195

REFERENCE :

AUTHORIZATION

COST LIMIT : \$35.00

[Handwritten Signature]

ORDER DATE : 11/01/2023

ORDER TIME : 12:45 PM

ORDER NO. :

CUSTOMER NO:

FOREIGN FILINGS

NAME: Novartis Latin America Services, 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: ALEXIS WEILAND-SORENSEN

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NOVARTIS LATIN AMERICA SERVICES, INC.

(Name of Corporation)

DOCUMENT NUMBER: FL12000001205

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

Please return all correspondence concerning this matter to the following:

JAIME HUERTAS

(Name of Person)

NOVARTIS CORPORATION

(Firm/Company)

ONE HEALTH PLAZA

(Address)

EAST HANOVER, NEW JERSEY 07936

(City/State and Zip code)

For further information concerning this matter, please call:

LILA FREEMAN

at (973) 222-7913

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

NOVARTIS LATIN AMERICA SERVICES, INC.

(Name of Corporation)

FL12000001205

(Document Number of Corporation (if known))

INCORPORATED IN DELAWARE-AUTHORIZED IN FLORIDA ON MARCH 20, 2012

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

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 HEALTH PLAZA

(Mailing Address)

EAST HANOVER, NEW JERSEY 07936

(City/ State /Zip)

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TALLAHASSEE, FLORIDA

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

/S/ JAIME HUERTAS

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

November 1, 2023

(Date)

JAIME HUERTAS

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)

FILING FEE \$35