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.

(((H15000222678 3)))



H150002226783ABC0

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)205-8842

Fax Number : (850)878-5368

DISSOLUTION OR WITHDRAWAL SYNOVIS LIFE TECHNOLOGIES, INC.

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

Electronic Filing Menu

Corporate Filing Menu

SSEE, FLORIDA Help

A RAMSEY

COVER LETTER

TO:	Amendment Section Division of Corporations		
SUBJ	ECT: Synovis Life Technologies, Inc.		
		(Name of Corpora	tion)
DOC	UMENT NUMBER: F1200000225	1	
The e	nclosed withdrawal application a	nd fee are submitted fo	r filing.
	e return all correspondence concern to the following:	ing this	
	Lee Paolino		
		(Name of Person)	
	Synovis Life Technologies, Inc.		
		(Firm/Company)	
	One Baxter Parkway	·	
		(Address)	
	Deerfield, IL. 60015		
		(City/State and Zip co	ode)
For fu	rther information concerning this r	natter, please call:	
Lee Paolino		at (948-3458
Enclos	(Name of Person) sed is a check for the amount:	(Area C	Code & Daytime Telephone Number)
\$35	Filing Fee \$43.75 Filing Fee of Certificate of State		Certificate of Status & Certified
•	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

Synovis Life Technologies, Inc.

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

٠;

(Name of Corporation)	
	WAS AS
F12000002251	E g
(Document Number of Corporation (if known)
Minnesota	<u> </u>
(Incorporated Under Laws of This corporation is no longer transacting business or conducting at voluntarily surrenders its authority to transact business or conduct a	ffairs within the State of Florida and hereby
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process the time it was authorized to transact business or conduct affairs in	ss based on a cause of action arising during
the time it was authorized to transact our mess of conduct arialis in	Fiorida.
The following is a current mailing address for the corporation:	The following is
One Baxter Parkway	9 1 -
(Mailing Address)	
Deerfield, IL. 60015	w
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future	are of any change in its mailing address.
16 Person -Malana	9/11/15
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Dawn Maloney	Assistant Secretary
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE S35