

2018-09-28 10 20 43 CST

19542080845 From Ranae McGraw



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

REGISTERED AGENT RESIGNATION BECKON SCIENTIFIC, INC.

| Certificate of Status | 0 |
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| Page Count | 02 |
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S. YOUNG

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, | |
|---|-----|
| Florida Statutes, the undersigned, NRAI SERVICES, INC. | |
| (Name of Registered Agent) | |
| hereby resigns as Registered Agent for BECKON SCIENTIFIC, INC. | |
| (Name of Corporation) | |
| F1300003950 | |
| (Document Number, if known) | |
| | .: |
| A copy of this resignation was mailed to the above listed corporation at its last known address. | |
| The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. | |
| TALL S | :_ |
| (Signature of Resigning Agent) | 1 |
| If signing on behalf of an entity: | LED |
| NRAI SERVICES, INC Helen Mac-Tran | |
| NRAI SERVICES, INC Helen Mac-Tran (Typed or Printed Name) | |
| ASSISTANT SECRETARY | |

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

(Capacity)