

F14000002969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

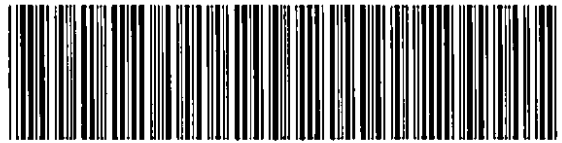
(Business Entity Name)

(Document Number)

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18 DEC 20 PM 4: 19

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2018 DEC 20 PM 4: 51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 21 2018


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2018 DEC 20 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195

REFERENCE : 553495 4312599

AUTHORIZATION : 
COST LIMIT : \$ 35.00

ORDER DATE : December 20, 2018

ORDER TIME : 2:41 PM

ORDER NO. : 553495-020

CUSTOMER NO: 4312599

FOREIGN FILINGS

NAME: SPRUCE PHYSICIANS, P.C.

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: Emily Croft - EXT# 62925

EXAMINER: _____

2010 DEC 20 PM 4:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Spruce Physicians, P.C., P.A.

(Name of Corporation)

DOCUMENT NUMBER: F14000002969

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

Please return all correspondence concerning this matter to the following:

Camille Duerr, Paralegal

(Name of Person)

Jones Day

(Firm/Company)

1420 Peachtree Street, NE, Suite 800

(Address)

Atlanta, GA 30309

(City/State and Zip code)

For further information concerning this matter, please call:

Camille Duerr

at (404) 581-8542

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & Certified
(Additional copy is enclosed) 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**

Spruce Physicians, P.C., P.A.

(Name of Corporation)

F14000002969

(Document Number of Corporation (if known))

California

(Incorporated Under Laws of)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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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:

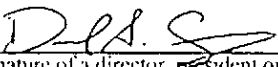
703 Market Street, Suite 2000

(Mailing Address)

San Francisco, CA 94103

(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)

December 19, 2018

(Date)

David Craig, M.D.

(Typed or printed name of person signing)

President and Secretary

(Title of person signing)

FILING FEE \$35