

F130000001749

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

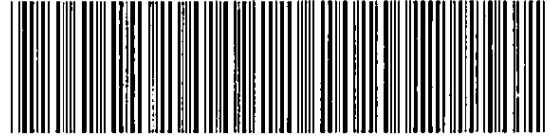
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2018 JAN 15 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FL

O SIMMONS

JAN 16 2020

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

ACCOUNT NO. : I20000000195

REFERENCE : 141805 8087266

AUTHORIZATION :

COST LIMIT : \$35.00

ORDER DATE : January 15, 2020

ORDER TIME : 2:42 PM

ORDER NO. : 141805-020

CUSTOMER NO: 8087266

FOREIGN FILINGS

NAME: ONYX HEALTHCARE, INC.

____ CORPORATE
____ LIMITED PARTNERSHIP
XXX 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: Kadesha Roberson - EXT#

EXAMINER:

FILE IS!

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Onyx Healthcare, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F15000001749

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

Please return all correspondence concerning this matter to the following:

Jordan Sager

(Name of Person)

Health Carousel, LLC

(Firm/Company)

3805 Edwards Road, Suite 700

(Address)

Cincinnati, OH 45209

(City/State and Zip code)

For further information concerning this matter, please call:

Jordan Sager

at (513) 794-3831

(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**

Onyx Healthcare, Inc.

(Name of Corporation)

F15000001749

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FL

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:


3805 Edwards Road, Suite 700

(Mailing Address)

Cincinnati, OH 45209

(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)

09/09/2019

(Date)

Jonathan Kukulski

(Typed or printed name of person signing)

Authorized Person

(Title of person signing)

FILING FEE \$35