F1500001065

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO		I2000000019	5
ACCOUNT	NO.	- 1	12000000013	_

REFERENCE: 428737 8076187

AUTHORIZATION :

COST LIMIT : \$35.00

ORDER DATE: December 19, 2016

ORDER TIME : 10:15 AM

ORDER NO. : 428737-010

CUSTOMER NO: 8076187

FOREIGN FILINGS

NAME: BLINK HEALTH CORE LTD.

XX 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: Melissa Zender - EXT#

EXAMINER:

COVER LETTER

	endment Section sion of Corporations		
	BLINK HEALTH CORE LTD.		
SUBJECT:		Name of Corporation	1)
	F15000004065	•	
DOCUMEN	NT NUMBER:		
The enclosed	d withdrawal application and fee	e are submitted for fi	ling.
Please return	n all correspondence concerning th	nis	
matter to the	<u>-</u>		
		7 II	
		Zoe Han Name of Person)	A Mary Comment
	'	(value of 1 cison)	
			
		(Firm/Company)	
	2	l Laffan Street	
		(Address)	*
	•	,	
		e Hamilton HM DX	
	(City	y/State and Zip code)	
For further is	nformation concerning this matter	, please call:	
Zoe	e Hanson	at (441)	295-1393 ext 103
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)
Enclosed is	a check for the amount:		
\$35 Filin	- -	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	MAILING ADDRESS: Amendment Section		STREET ADDRESS: Amendment Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		2661 Executive Center Circle

Tallahassee, FL.32314

Tallahassee, FL. 32301

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

BLINK HEALTH CORE LTD.	
(Name of Corporation)	
F15000004065	
(Document Number of Corporation (if h	mown)
BERMUDA	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affavoluntarily surrenders its authority to transact business or conduct affar This corporation revokes the authority of its registered agent in Flappoints the Department of State as its agent for service of process	airs in Florida. orida to accept service on its behalf and based on a cause of action arising during
the time it was authorized to transact business or conduct affairs in Fl	orida.
The following is a current mailing address for the corporation:	
H.P. HOUSE, 21 LAFFAN STREET	
(Mailing Address) HAMILTON, BERMUDA HM 09	
(City/ State /Zip)	3
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)	(Date)
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35