## F1000000191

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C. GOLDEN 0CT 2 7 2017

## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	AVISYN PHARMA INC
300	(Name of Corporation)
DOC	MENT NUMBER: F16000000797
The e	closed withdrawal application and fee are submitted for filing.
	return all correspondence concerning this to the following:
	MICHELLE ROY
	(Name of Person)
	AVISYN PHARMA INC
	(Firm/Company)
	4275 Executive Square suite 200
	(Address)
	La Jolla , CA 92105
	(City/State and Zip code)
For fu	her information concerning this matter, please call:
Jeffrey	at ( ) 741-9638
Enclo	(Name of Person) (Area Code & Daytime Telephone Number) ed is a check for the amount:
\$3.	Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified (Additional copy is Copy (Additional copy is enclosed)
	MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center Circle

Tallahassee, FL. 32301

Tallahassee, FL.32314

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	APPLICATION BY FOREIGHORITY TO TRANSACT				
D ALL COLUMN	MORELL TO TRANSACT	BUSINESS OR CC	MDUCI AFFAIF	CS IN FLORID	After the control of
	AVISYN PHARMA INC				
	1	(Name of Corporation)			
	P14000000000	·			
The second secon	P16000000797	ent Number of Corporation	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	<del></del> .	
State of	. (Docume	an Number of Corporation	(tricknown)		
	DELEWARE		\$ 6	• •	e = ~8
		(Incorporated Under Laws o	nf)		, A
	ì				ū
	orporation is no longer transacting b			of Florida and here	by
volunt	arily surrenders its authority to transa	ect business or conduct :	affairs in Florida.		
	orporation revokes the authority of				
	nts the Department of State as its ago ne it was authorized to transact busing			action arising dur	ing
, ,			. 101.00		
The fo	illowing is a current mailing address	for the corporation:			
	4275 Executive Square suite 200				
		(Mailing Address)		<del></del>	•
	La talla CA 02105			•	•
	La Jolla , CA 92105	(City/ State /Zip)		<del></del>	
		(City/ State (25p)			
	10.1				
The co	rporation agrees to notify the Depart	ment of State in the futu	re of any change in its	mailing address.	
and the state of t	Michouston	· .	October 3, 2017		.⇔ عدیت ها
	(Signature of a director, president or other office receiver or other court appointed fiduciary, by	r - if in the hands of a that fiduciary)	(Date)		
	MICHELLE ROY		PRESIDENT		•
	Typed or printed name of person signi	ng)	(Title of person	on signing)	<u></u>
		FILING FEE \$35			
		•	•	•	
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