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WOLFE, WOLFE & RYD

ATTORNEYS AND COUNSELLORS
TWENTY NORTH WACKER DRIVE
SUITE 3550
CHICAGO, ILLINOIS 60606

HOWARD O. WOLFE
KERRY B. WOLFE
STEPHEN E. RYD
WILLIAM B. LEVY

TELEPHONE
(312) 372-6400
TELEFAX
(312) 372-6161
WEBSITE
www.wwrlaw.com

March 27, 2002

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

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-04/01/02--01057--022
*****35.00 *****35.00

Dear Sir or Madam:

This office represents the following:

SULLIVAN DENTAL PRODUCTS, INC.

On behalf of the above, enclosed please find for filing duplicate originals of an Application By Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida. Also enclosed herewith is a check made payable to the Florida Department of State in the amount of \$35.00 for the filing fee due with this application.

Please acknowledge receipt of this filing by date stamping the enclosed copy of this letter and returning it in the self addressed stamped envelope provided for your convenience.

Very truly yours,

WOLFE, WOLFE & RYD

By 
William B. Levy

WBL/kjs
Enclosures
C:sullivan/withdrawal/statetransltr

FILED
02 APR - 1 PM 1:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED FROM WOLFE, WOLFE & RYD

Date: _____

By: _____

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

Sullivan Dental Products, Inc.
(Name of Corporation)

Wisconsin
(Incorporated Under Laws Of)

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.

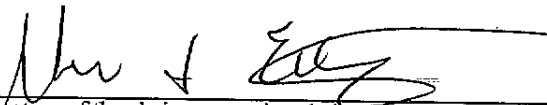
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

20 N. Wacker Dr., Suite 3550
(Mailing Address)

Chicago, IL 60606
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.


Signature of the chairman or vice chairman of the board, president, or any officer. Vice President
Title

Michael S. Ettinger
Typed or printed name

12/16, 2001
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 APR - 1 PM 1:23

FILED