

F 94000006203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

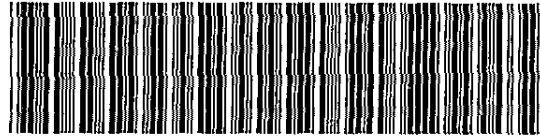
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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600110144576

Withdrawal

10/05/07--01033--022 **35.00

FILED

2007 OCT -5 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*APR
10/11/07*



October 3, 2007

Florida Secretary of State
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Application by Foreign Corporation for Withdrawal of Authority to Transact Business

Dear Sir/Madam:

Please find enclosed for filing with your office an Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida and our check in the amount of \$35.00 to cover the cost of filing.

If you should have any questions or need additional information, please contact me at (603) 821-8103.

Thank you for your courtesy and cooperation in this matter.

Best Regards,

A handwritten signature in black ink, appearing to read "Robin J. Flynn".

Robin J. Flynn
Senior Paralegal

/rjf
Enclosures
Cc: File

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hemophilia Access Inc.
(Name of Corporation)

DOCUMENT NUMBER: F94000006203

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

Please return all correspondence concerning this matter to the following:

Robin Flynn
(Name of Person)

Critical Care Systems International
(Firm/Company)

61 Spit Brook Road
(Address)

Nashua, NH 03060
(City/State and Zip code)

For further information concerning this matter, please call:

Robin flynn at (603) 888-1500 ext 25103
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Hemophilia Access Inc.

(Name of Corporation)

F94000006203

(Document Number of Corporation (if known))

Tennessee

(Incorporated Under Laws of)

FILED
2007 OCT -5 PM 4:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

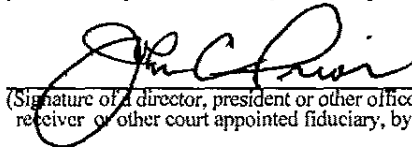
c/o Critical Care Systems, 61 Spit Brook Road

(Mailing Address)

Nashua, NH 03060

(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)

October 2, 2007
(Date)

John C. Prior

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILING FEE \$35