

F91000003227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

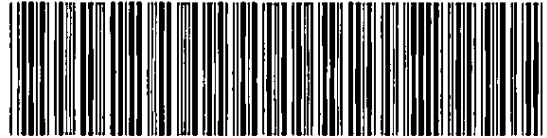
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

2020 JAN 16 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FL

2020 JAN 16 09:20:01



RESUBMIT

Please give original
submission date as file date.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 15, 2020

CSC

SUBJECT: THE SPECTRANETICS CORPORATION
Ref. Number: F96000003227

We have received your document for THE SPECTRANETICS CORPORATION and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder
Regulatory Specialist III

Letter Number: 820A00001092

20 JAN 15 PM 3:07

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

ACCOUNT NO. : I20000000195
REFERENCE : 127636 7656375
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 35.00

ORDER DATE : January 9, 2020
ORDER TIME : 11:25 AM
ORDER NO. : 127636-080
CUSTOMER NO: 7656375

FOREIGN FILINGS

NAME: THE SPECTRANETICS CORPORATION

XX CORPORATE
 LIMITED PARTNERSHIP
 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# 62980

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Spectranetics Corporation

(Name of Corporation)

DOCUMENT NUMBER: F96000003227

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

Please return all correspondence concerning this matter to the following:

Irma I. Gomez

(Name of Person)

Philips North America

(Firm/Company)

3000 Minuteman Road

(Address)

Andover, MA 01810

(City/State and Zip code)

For further information concerning this matter, please call:

Robert Branch _____ at (800) 927-9801
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$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
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**

The Spectranetics Corporation

(Name of Corporation)

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

FILED
2020 JAN 14 AM 9:47
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:

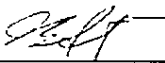
c/o Corporation Service Company, 251 Little Falls Drive

(Mailing Address)

Wilmington, DE 19808

(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)

1/6/20

(Date)

Joseph E. Innamorati

(Typed or printed name of person signing)

Vice President

(Title of person signing)

FILING FEE \$35