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COVER LETTER

TO: Amendment Section Division of Corpora	
SUBJECT: InfiMed, In	nc.
	(Name of Corporation)
DOCUMENT NUMBER:	
The enclosed withdrawal a	pplication and fee are submitted for filing.
Please return all correspond matter to the following:	ence concerning this
Carrie Murphy	/
	(Name of Person)
InfiMed, Inc.	
	(Firm/Company)
121 Metropoli	tan Drive
	(Address)
Liverpool, NY	13088
	(City/State and Zip code)
For further information cond	cerning this matter, please call:
Carrie Murphy	at (315) 453-4545 (Area Code & Daytime Telephone Number)
(Name of Per	(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

InfiMed, Inc.

(Name of Corporation))
F96000006714	
(Document Number of Corporation	ı (if known)
	ور آواز
New York	s of)
(Incorporated Under Laws	(sof)
	· ·
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conduct	affairs within the State of Florida and herel
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Floring it was authorized to transact business or conduct affairs in Floring its way authorized to transact business or conduct affairs in Floring its way authorized to transact business or conduct affairs in Floring its way authorized to transact business or conduct affairs in Floring its way are the conduct affairs in Floring its way ar	s based on a cause of action arising during the
The following is a current mailing address for the corporation:	
121 Metropolitan Drive	
(Mailing Address)	
Liverpool, NY 13088	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the fut	October 30, 2007
(Signature of a director, president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) Amy Ryan	President
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35