F 98000000745

<u> </u>
(Requestor's Name)
(Address)
(Address)
(1881949)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
•
(Business Entity Name)
(Dayward Nilly (Carl)
(Document Number)
Certified Copies Certificates of Status
,
Special Instructions to Filing Officer:
•

Office Use Only



500065915445

2006 FEB 27 PM 4: 21

י ורנט

O6 FEB 27 TH 4: 17
DIVISION OF CONTROL

withdr.
G. Coullietta FEB 2 7 2006



ACCOUNT NO. : 072100000032
REFERENCE : 884032 7182683
AUTHORIZATION Spellelenan
COST LIMIT : \$5.00
ORDER DATE: February 23, 2006
ORDER TIME : 2:56 PM
ORDER NO. : 884032-535
CUSTOMER NO: 7182683
FOREIGN FILINGS NAME: TEAM RADIOLOGY, INC.
CORPORATE XXXX WITHDRAWAL/CANCELLATION
NAME ATTIDIONALLY CONCEDED TO
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX PLAIN STAMPED COPY
CONTACT PERSON: Heather Chapman - EXT# 2908
EXAMINER:

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

TEAM RADIOLOGY, INC.			
(Name of Corporation)	TALLA	2006 F	
F9800000745	HA A	8	-11
(Document Number of Corporation (if known)	RY Y	7	
	E, FL 30/ S		0
North Carolina	유동	<u> </u>	
(Incorporated Under Laws of)	IDA AUI	2	

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:

1900 North Winston Road, Suite 300

(Mailing Address)		. ₹ . `=
Knoxville, TN 37919	ريان د د د د د د د د د د د د د د د د د د د	.±4
(City/ State /Zip)		
The corporation agrees to notify the Department of State in the full (Signature of a director president or other officer - if in the hands of a receiver or other count appointed fiduciary, by that fiduciary)	ature of any change in its mailing address. 2/26	
John R. Stair	Assistant Secretary	
(Typed or printed name of person signing)	(Title of person signing)	

FILING FEE \$35