

F98000001854

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

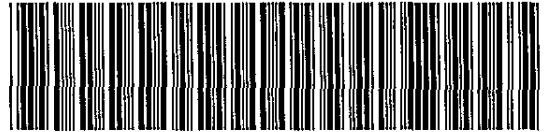
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500020869115

Withdrawal

06/27/03--01013--009 \*\*35.00

RECEIVED  
03 JUN 27 AM 10:53  
TALLAHASSEE, FLORIDA

FILED  
03 JUN 27 PM 12:25  
TALLAHASSEE, FLORIDA  
AOR  
6/27/03

35



236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP 6-27-03 Kelly

       CERTIFIED COPY       

       CUS       

☒ PHOTO COPY       

☒ FILING Withdrawal

1.) Affiliated Forensic Laboratories, Inc.  
(CORPORATE NAME & DOCUMENT #)

2.)         
(CORPORATE NAME & DOCUMENT #)

3.)         
(CORPORATE NAME & DOCUMENT #)

4.)         
(CORPORATE NAME & DOCUMENT #)

5.)         
(CORPORATE NAME & DOCUMENT #)

SPECIAL INSTRUCTIONS

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

Affiliated Forensic Laboratories, Inc.

(Name of Corporation)

Arizona

(Incorporated Under Laws Of)

03 JUN 27 PM 12:25  
FILED  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

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.

3030 N. Central Ave. Ste 501

(Mailing Address)

Phoenix AZ 85012

(City/ State /Zip)

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



Signature

President

Title

William J. Flynn

Typed or printed name

5-2-2003

Date