F99000004596

(Requestor's Name)
(Address)
(Address)
·
(City/State/Zip/Phone #)
(City/State/Zip/Fitorie #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document rumber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
appearant media addition to 1 ming announce



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SECRETARY OF STATE

Office Use Only

R.A. Resignation

T BROWN DEC 1 3 2004

CT CORPORATION

December 6, 2004

RE: MEDASSETS EXCHANGE, INC. (DE. DOM.)

Secretary of State Corporate Records Bureau Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 checks in the amount of \$35.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

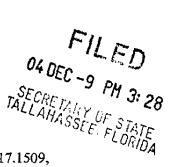
Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure

> 111 Eighth Avenue New York, NY 10011 Tel. 212 894 8940 Fax 212 590 9180

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION



Pursuant to the provisions of sections 60'	7.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM
	(Name of Registered Agent)
hereby resigns as Registered Agent for _	MEDASSETS EXCHANGE, INC. (DE. DOM.)
	(Name of Corporation)
F9900004596	
(Document Number, if known)	
A copy of this resignation was mailed to	the above listed corporation at its last known address.
this statement is filed.	discontinued on the 31st day after the date on which
(Sign	nature of Resigning Agent)
If signing on behalf of an entity:	
C T CORPORATIO	ON SYSTEM - THERESA ALFIERI
(T ₃	yped or Printed Name)
ASSI	STANT SECRETARY
	(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314