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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

withdrawal

T BROWN JAN - 4 2005

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Med Assets Exchange, Inc.  
(Name of corporation)

**DOCUMENT NUMBER:** FEIN 51-0391129

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

Please return all correspondence concerning this matter to the following:

Lance M. Culbreth  
(Name of Person)

Med Assets, Inc.  
(Firm/Company)

100 North Point Center East, Suite 200  
(Address)

Alpharetta GA 30022  
(City/State and Zip code)

For further information concerning this matter, please call:

Maurice Flannery at ( 678 ) 323-2596  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL. 32399

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL. 32314

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

MedAssets Exchange, Inc.  
(Name of Corporation)

FEIN 51-0391129  
(Document Number of Corporation (if known))

Delaware  
(Incorporated Under Laws of)

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04 DEC 23 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

100 North Point Center East, Suite 200  
(Mailing Address)

Alpharetta GA 30022  
(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)

12/16/04  
(Date)

Scott Grossett  
(Typed or printed name of person signing)

Senior V.P.  
(Title of person signing)

FILING FEE \$35