

L160000021751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

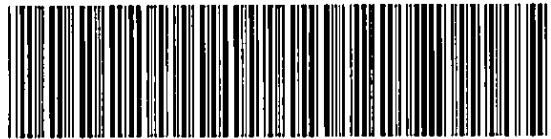
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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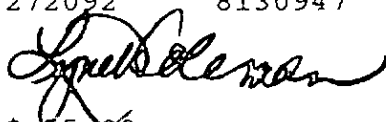
18 JUN 22 PM 6:24

2018 JUN 22 AM 8:01

FILED

JUN 25 2018  
J. HARRIS

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 272092 8130947  
AUTHORIZATION :   
COST LIMIT : \$ 55.00

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ORDER DATE : June 22, 2018  
ORDER TIME : 4:01 PM  
ORDER NO. : 272092-010  
CUSTOMER NO: 8130947

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DOMESTIC AMENDMENT FILING

NAME: FISSION DIAGNOSTICS LLC

EFFECTIVE DATE:

XX DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER'S INITIALS: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FISSION DIAGNOSTICS LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Mindy Andia

(Contact Person)

Fission Diagnostics LLC

(Firm/Company)

613 Northlake Boulevard, Suite 4

(Address)

North Palm Beach, FL 33410

(City/State and Zip Code)

For further information concerning this matter, please call:

Mindy Andia

(Name of Contact Person)

at 561 308-6452

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**  
(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: FISSION DIAGNOSTICS LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L16000021751

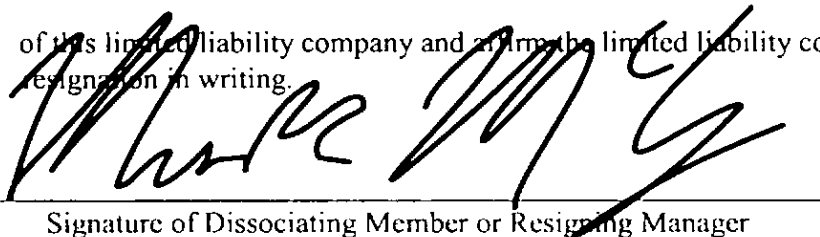
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 6/22/2018

4. I, Mark McGinley, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Authorized Member

(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.



Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

FILED  
2018 JUN 22 AM 8:01  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA