

# M0600000509

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**

Division of Corporations  
Fax Number : (850) 617-6133

**From:**

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1032  
Fax Number : (850) 878-5358

FILED  
2011 JUN 30 AM 8:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LLC DISSOLUTION OR WITHDRAWAL  
BLAKE IMAGING, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

C. LEWIS

JUL -1 2011

EXAMINER

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Blake Imaging, LLC  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ceci Estill

(Name of Person)

HCA Management Services, L.P.

(Firm/Company)

(Address)

One Park Plaza - Legal Dept., Nashville, TN 37203

(City/State and Zip Code)

For further information concerning this matter, please call:

Ceci Estill

(Name of Person)

at 615

344-2994

(Area Code & Daytime Telephone Number)

**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 6027  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR  
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN  
FLORIDA**

Blake Imaging, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M06000000509

(Florida Document Number)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent 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 in Florida.

One Park Plaza - Legal Dept.

(Mailing address)

Nashville, TN 37203

(City/State/Zip)

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

HCA Outpatient Imaging Services Group, Inc., member

By: *Dora A. Blackwood*

(Signature of member or authorized representative of a member)

Dora A. Blackwood, authorized representative of member

(Typed or printed name of signee)

Filing Fee: \$25.00

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