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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 18 2014
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VERSAMED MEDICAL SYSTEMS, 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:

Ann-Marie McElligott

(Name of Person)

General Electric Company

(Firm/Company)

12 Corporate Woods Blvd

(Address)

Albany, NY 12211

(City/State and Zip Code)

For further information concerning this matter, please call:

Ann-Marie McElligott at 518 433-4419

(Name of Person)

(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 6327
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

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TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

VERSAMED MEDICAL SYSTEMS, LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

05/19/2009

(Date registered with Florida Department of State)

M09000001899

(Florida Document Number)

This limited liability company withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Ann-Marie McElligott

(Typed or printed name of signee)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00