

M10000001466

(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



900268960699

02/17/15--01000--011 **25.00

FILED
15 FEB 17 AM 9:29
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

Shivers FEB 24 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Schweiz Health 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:

Lynne Osborn

(Name of Person)

(Firm/Company)

19 Central St, Suite C

(Address)

Byfield, MA 01922-1233

(City/State and Zip Code)

For further information concerning this matter, please call:

Lynne Osborn

(Name of Person)

617

763-0109

at (

) (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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Schweiz Labs LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

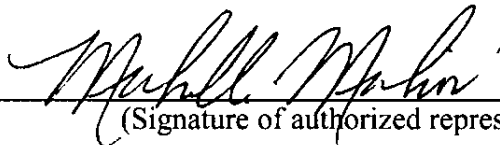
Mar 29, 2010

(Date registered with Florida Department of State)

M10000001466

(Florida Document Number)

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



(Signature of authorized representative)

Michelle Miakos

(Typed or printed name of signee)

FILED
15 FEB 17 AM 9:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00