

M10000003714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

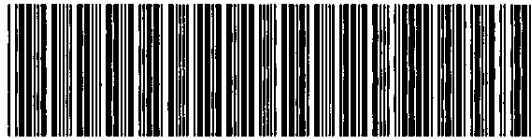
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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14 MAR 24 PM 3:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 Search **11/26/2014**

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KERR:HEALTH

March 20, 2014

Florida Department of State
Divisions of Corporation
Post Office Box 6327
Tallahassee, Florida 32314

Re: Kerr Health, LLC
Document No. M10000003714

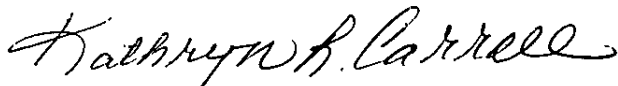
Dear Sir or Madam:

On August 20, 2010, you issued an Authority to Kerr Health, LLC to do business in Florida. Kerr Health, LLC was closed on November 8, 2013, and all assets were transferred to Walgreens.

Enclosed please find Notice of Withdrawal of Certificate of Authority, together with Kerr's Check No. 489103, in payment of the filing fee.

Should you have any questions concerning the above, please contact me via phone at 919 544-3896 Ext. 157, via facsimile at 919 544-9749 or via email at kcarroll@kerrdrug.com.

Yours truly,



Kathryn R. Carroll,
Paralegal to General Counsel

KRC/bme
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kerr 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:

Kathryn R. Carroll

(Name of Person)

Kerr Health, LLC

(Firm/Company)

3220 Spring Forest Road

(Address)

Raleigh, NC 27616

(City/State and Zip Code)

For further information concerning this matter, please call:

Kathryn R. Carroll

(Name of Person)

at (919) 544-3896 X157

(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:

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|---|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Kerr Health, LLC

(Name of limited liability company)

North Carolina

(Jurisdiction of its organization)

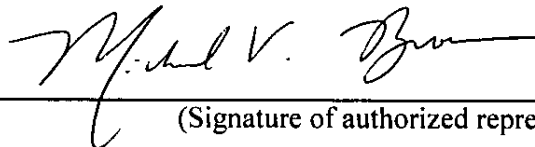
August 23, 2010

(Date registered with Florida Department of State)

M10000003714

(Florida Document Number)

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



(Signature of authorized representative)

Michael V. Brown, President

(Typed or printed name of signee)

FILED
14 MAR 24 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00