

M11000004518 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

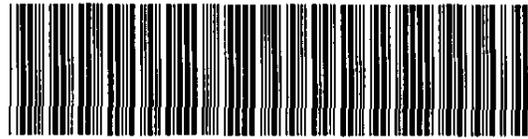
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
3 JAN 28 AM 10:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 JAN 28 AM 11:18

FILED

B. BOSTICK

JAN 29 2013

EXAMINER



CSC

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 507311 4306601

AUTHORIZATION :

COST LIMIT : \$ 25.00



ORDER DATE : January 24, 2013

ORDER TIME : 8:34 AM

ORDER NO. : 507311-010

CUSTOMER NO: 4306601

FOREIGN FILINGS

NAME: AUDIOLOGY BUSINESS SERVICES,
LLC

XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes - EXT# 52920

EXAMINER: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Audiology Business Services, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M11000004518

(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.

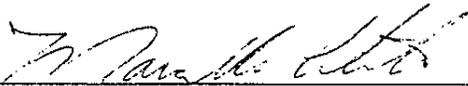
215 Shuman Blvd., Suite 401

(Mailing address)

Naperville, Illinois 60563

(City/State/Zip)

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



(Signature of member or authorized representative of a member)

Marcello Celentano, Manager

(Typed or printed name of signee)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00