

M 11 000000 4867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

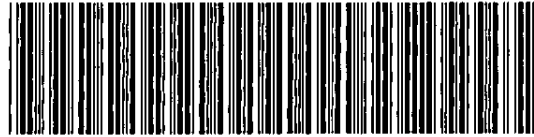
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**B. KOHR**

DEC 19 2011

**EXAMINER**



700215226967

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 DEC 19 AM 9:58

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2011 DEC 19 PM 4:21  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 031104 7840193

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 DEC 19 AM 9:58

ORDER DATE : December 19, 2011

ORDER TIME : 2:53 PM

ORDER NO. : 031104-005

CUSTOMER NO: 7840193

FOREIGN FILINGS

NAME: NAADM, LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER: \_\_\_\_\_

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: NAADM, 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:

Weaver H. Gaines

(Name of Person)

Nanotherapeutics, Inc.

(Firm/Company)

13859 Progress Blvd., Suite 300

(Address)

Alachua, FL 32615

(City/State and Zip Code)

For further information concerning this matter, please call:

Weaver H. Gaines

(Name of Person)

at (917) 862-2274  
(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

FILED STATE  
SECRETARY OF CORPORATIONS  
DIVISION OF CORPORATIONS  
11 DEC 19 AM 9:58

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

NAADM, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M11000004867

(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.

13859 Progress Blvd., Suite 300

(Mailing address)

Alachua, FL 32615

(City/State/Zip)

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

*Weaver H. Gaines*

(Signature of member or authorized representative of a member)

Weaver H. Gaines

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 DEC 19 AM 9:58