

M17000005947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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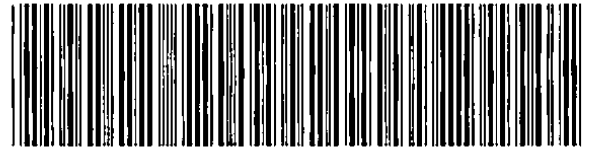
(Business Entity Name)

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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 265202 7391412

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : November 23, 2021

ORDER TIME : 4:53 PM

ORDER NO. : 265202-005

CUSTOMER NO: 7391412

FOREIGN FILINGS

NAME: LYNX HEALTH, LLC

 CORPORATE
 LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER: _____

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

LYNX HEALTH, LLC

(Name of limited liability company)

NEW JERSEY

(Jurisdiction of its organization)

07/13/2017

(Date registered with Florida Department of State)

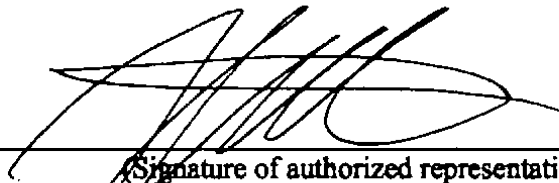
M17000005947

(Florida Document Number)

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

Effective Date, if other than the date of filing: UPON FILING (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

BRIAN F. TYBURSKI, MANAGER

(Typed or printed name of signee)

2021 NOV 24 PM 8:45
FILED
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
IN FLORIDA
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00