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Certificates of Status			
) Officer:			

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EXAMINER



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TO ACKNOWLEDGE TO ACKNOWLEDGE SUFFICIENCY OF FILING RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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ACCOUNT NO. : I2000000195 REFERENCE: 853332 5124708 AUTHORIZATION : COST LIMIT ORDER DATE: July 21, 2011 ORDER TIME: 9:45 AM ORDER NO. : 853332-005 CUSTOMER NO: 5124708 FOREIGN FILINGS NAME: BADGER ACQUISITION OF TAMPA, LLCCORPORATE 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: Matthew Young - EXT# 2962

EXAMINER:

COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT: Badg	ger Acquisition of Tam		
	(Name of Fo	oreign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitt	ed for filing.	
Please return all corr	respondence concerning thi	s matter to the following	g:
Cecilia Temple	(Al. CD		-
	(Name of Person)		
Omnicare			
	(Firm/Company)		-
100 E. RiverCen	ter Blvd., Suite 1600 (Address)		
Covington, KY 4	11011		
(City/State and Zip Code)			
For further informati	on concerning this matter, p	please call:	
Cecilia Temple		at (859	392-9017
(Na	nme of Person)	(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

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

Badger Acquisition of Tampa, LLC
(Name of limited liability company)
Badger Acquisition of Tampa, LLC (Name of limited liability company) Delaware
(Jurisdiction of its organization)
M98000001\$52
(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.
100 E. RiverCenter Blvd., Suite 1600
(Mailing address)
Covington, KY 41011
(City/State/Zip)
The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.
Imple
(Signature of member or authorized representative of a member)
Regis T. Robbins, Authorized Representative of Member
(Typed or printed name of signee)

Filing Fee: \$25.00