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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

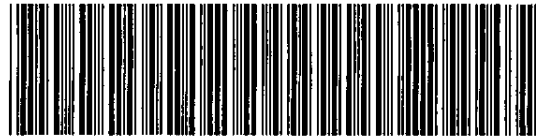
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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530
[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Wellington Medical Technologies, 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:

Marylynn Magar

(Name of Person)

HeartCare Imaging, Inc.

(Firm/Company)

725 N A1A, B105

(Address)

Jupiter, FL 33477

(City/State and Zip Code)

For further information concerning this matter, please call:

MaryLynn Magar

(Name of Person)

at (561) 743 7455

(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

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TALLAHASSEE, FLORIDA



"Your Link to the World of Imaging"

725 North A1A • Suite B-105 • Jupiter, FL 33477
561.746.6125 • Fax: 561.741.2036 • www.heartcareimaging.com

May 21, 2007

Dear Sir or Madam:

Please find attached a signed Application for Withdrawal of a Limited Liability Company. Wellington Medical Technologies, LLC is no longer in business due to damage incurred during Hurricane Wilma. Please contact me should you need further information regarding this Company.

Sincerely,

A handwritten signature in cursive script, appearing to read "MaryLynn Magar".

MaryLynn Magar
VP/ GM, HeartCare Imaging, Inc.
561-743-7455
561-743-7691 (fax)
mlmagar@heartcareimaging.com

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Wellington Medical Technologies, LLC

(Name of limited liability company)

DE

(Jurisdiction of its organization)

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.

725 N. A1A #B105

(Mailing address)

Jupiter, FL 33477

(City/State/Zip)

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

M Magar

(Signature of member or authorized representative of a member)

MaryLynn Magar

(Typed or printed name of signee)

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TALLAHASSEE, FLORIDA

Filing Fee: \$25.00