

P00000054711

(Requestor's Name)

CARLTON FIELDS

POST OFFICE BOX 3239
TAMPA, FLORIDA 33601-3239

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400008685014

11/04/02--01045--011 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 NOV -8 PM 3:55

FILED

P00000054711
RARE 25-01
11-7-02

RESIGNATION OF REGISTERED AGENT

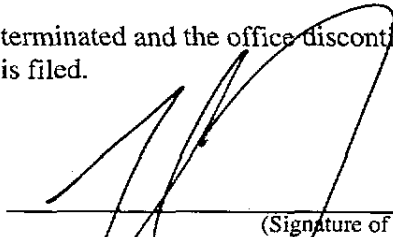
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Nathaniel L. Doliner
(Name of registered agent)

hereby resigns as Registered Agent for Criticare Diagnostic Laboratory, Inc.
(Name of corporation)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of resigning agent)

If signing on behalf of an entity:

NATHANIEL L. DOLINER
(Typed or Printed Name)

(Capacity)

FILED
02 NOV - 8 PM 3:55
CLERK OF STATE
TALLAHASSEE, FLORIDA

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314