# P02569

(Re	questor's Name)	
(Ad	dress)	_
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne). : • , , · · · ·
(Do	cument Number)	1 100 to 1
Certified Copies	_ Certificates	s of Status :
Special Instructions to	Filing Officer:	

Office Use Only



500160276045

09/08/09--01030--019 \*\*35.00

OP SEP -8 AH 11: 17

8 Roberts | SEP 1 1 2009



Healthcare Imaging Specialists P.O. Box 1038 Bloomfield, NJ 07003-1038 (973) 707-1100 - Phone (973) 707-1127 - Fax www.mrii.com

August 30, 2009

Florida Department of State Division of Corporations Amendment Section P.O. Box 6327 Tallahassee, Florida 32314

Re:

Imaging Resources, Inc. (cross-reference name: Medical Resources, Inc.)

Document No. P002569

Dear Sir:

Enclosed please find the Application by Foreign Corporation for Withdrawal of Authority to Transact Business in Florida, along with our check number 1567 in the amount of \$35.00 as payment for the filing fee.

Please return a letter of acknowledgment and a certificate of withdrawal to the following address:

Medical Resources, Inc. P.O. Box 1038 Bloomfield, NJ 07003-1038 Attn.: John Valla

Should you have any questions or require additional information please contact me at 201-933-7974 or John Valla at 973-873-9850.

Very truly yours,

Carol Rosensteel

Paralegal

### COVER LETTER

TO: Amendment Section **Division of Corporations** IMAGING RESOURCES, INC. (cross reference name: Medical Resources, Inc.) (Name of Corporation) DOCUMENT NUMBER: P02569 The enclosed withdrawal application and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOHN VALLA (Name of Person) IMAGING RESOURCES, INC. c/o MEDICAL RESOURCES, INC. (Firm/Company) 1455 BROAD STREET, PO BOX 1038 (Address) BLOOMFIELD, NJ 07003-1038 (City/State and Zip code) For further information concerning this matter, please call: O1 933-7974
(Area Code & Daytime Telephone Number) CAROL ROSENSTEEL

#### **MAILING ADDRESS:**

(Name of Person)

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

IMAGING RESOURCES, INC. (cross reference name: Medical Resources place)
(Name of Corporation)
P02569
(Document Number of Corporation (if known)
DELAWARE
(Incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.  This corporation revokes the authority of its registered agent in Florida 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 or conduct affairs in Florida.  The following is a current mailing address for the corporation:  MAGING RESOURCES, INC. c/o MEDICAL RESOURCES, INC.  (Mailing Address)
1455 BROAD STREET, PO BOX 1038, BLOOMFIELD, NJ 07003-1038 (City/ State /Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  (Date)
JOHN VALLA (Typed or printed name of person signing)  (Title of person signing)

**FILING FEE \$35**