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S OCT I L AN IO OC MILAHASSEE FLORID



COVER LETTER

TO:	Amendment Section Division of Corporations		e _n		
SUB.	JECT: INTERVASCULAR, INC	.	Par Sa T		
		(Name of Corp.	oration)		
DOC	UMENT NUMBER:		FIG. TE		
The e	enclosed withdrawal application	and fee are submitted	I for filing.		
	e return all correspondence conce er to the following:	rning this			
		Joseph E. Ak	in		
		(Name of Perso	n)		
		Intervascular,	Inc.		
(Firm/Company)					
14 Philips Parkway					
(Address)					
		Montvale, NJ 0	7645		
		(City/State and Zip	code)		
For f	urther information concerning this	s matter, please call:			
	Joseph E. Akin	at	201 307 5311		
	(Name of Person)	(Are	ea Code & Daytime Telephone Number)		

STREET ADDRESS:

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

MAILING 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

INTERVASCULAR, _IN	NC
(Name of Corporation)	The of
	E S S T
	i (if known)
(Document Number of Corporation	(if known)
(= 0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	64.8
DE .	
DE (Incorporated Under Laws	00
(Incorporated Officer Laws	01)
This community is a lower transaction business on conducting a	effective within the State of Alaxida and haraba
This corporation is no longer transacting business or conducting a	
voluntarily surrenders its authority to transact business or conduct a	aliairs 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 Flo	orida.
The following is a current mailing address for the corporation:	
14 PHILIPS PARKW	AY
(Mailing Address)	
MONTVALE, NJ 076	45
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the futi	ure of any change in its mailing address
The corporation agrees to notify the Bepartment of State in the fath	into or any change in the maring address.
Mark Market	09/23/2005
(Signature of a director, president or other officer if in the hands of a	(Date)
receiver or other count appointed fiduciary, by that fiduciary)	
Frank L. Gutworth	Assistant Treasurer
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35