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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

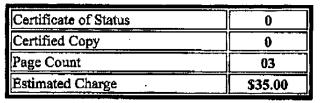
From:

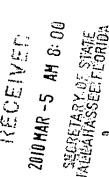
Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone Fax Number ; (850)222-1092 : (850)878-5368

DISSOLUTION OR WITHDRAWAL BAXTER SYSTEMS INC.





Electronic Filing Menu

Corporate Filing Menu

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C.COULLIETTE

MAR 08 2010

EXAMINER

COVER LETTER

Division of Corporations	Division of Corporations	
SUBJECT:	Baxter Systems Inc.	
	(Name of Corporation)	
DOCUMENT NUMBER:		
The enclosed withdrawal application ar	nd fee are submitted for filing.	
Please return all correspondence concernmenter to the following:	ing this	
	Lee Paolino	
	(Name of Person)	
	Baxter International Inc.	
	(Firm/Company)	
	One Baxter Parkway, DF2-1W	
**************************************	(Address)	
	Deerfield, IL 60015	
	(City/State and Zip code)	
For further information concerning this m	natter, please call:	
Lee Puolino	at (847) 948-3458	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET ADDRESS:	MAILING ADDRESS:	
Amendment Section	Amendment Section	

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO: Amendment Section

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

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FILING FEE \$35

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