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Michael G. Adams Kentucky Secretary of State Received and Filed: 8/4/2023 2:25 PM Fee Receipt: \$40.00



## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602	Certificate of Withdrawal (Foreign Business Entity)		WFE
(502) 564-3490 www.sos.ky.gov	,,		
business entity named below and	S 14A - 030 the undersigned applies for a d, for that purpose, submits the following		awal on behalf of the
1. The name of the business ent	BPC PLASMA, INC.		
	(The name must be identical to the na	ame on record with th	e Secretary of State.)
2. The state or country of format	ion is DELAWARE		
3. The Secretary of State may for	orward to the business entity at the follow d commits to notify the Secretary of State	ing street address ar of any future change	ny process served es to this address:
901 Yamato Road, Suite 101	Boca Raton	FL	33431
Street Address (No Post Office Bo	x Numbers) City	State	Zip Code
in the Commonwealth or pursuar authority from the commissioner  5. The business entity revokes appoints the Secretary of State a during the time it was authorized of State in the future of any chan	the authority of its registered agent to acc s its agent for service of process in any p to transact business in the Commonwea ge in its mailing address.	ept service of proces	ss on its behalf and a cause of action arising
6. This application will be effective	ve upon filing.		
I declare under penalty of perjury	under the laws of Kentucky that the forg	oing is true and corre	
200	Frederic Esrailian	, President	08/03/2023
Signature of Authorized Represen	tative Printed Name		Date