## F9700006265

| (Re                                     | questor's Name) |        |  |
|---|-----------------|--------|--|
|   |                 |        |  |
| (Ad                                     | dress)          |        |  |
|   |                 |        |  |
| (Address)                               |                 |        |  |
|   |                 |        |  |
| (City/State/Zip/Phone #)                |                 |        |  |
| PICK-UP                                 | WAIT            | MAIL   |  |
|   |                 |        |  |
| (Business Entity Name)                  |                 |        |  |
|   |                 |        |  |
| (Document Number)                       |                 |        |  |
|   |                 |        |  |
| Certified Copies Certificates of Status |                 |        |  |
|   |                 | ·      |  |
| Special Instructions to Filing Officer: |                 |        |  |
| ,                                       | -               | 1      |  |
|   |                 | ł      |  |
|   |                 | :      |  |
|   |                 | )      |  |
|   |                 |        |  |
|   |                 | \<br>\ |  |
|   |                 |        |  |

Office Use Only



000051358010

withdr Thewir



06/29/05--01023--004 \*\*50.00

## Corporation Service for Attorneys

CORPORATION OUTFITS

STOCK AND BOND CERTIFICATES
MINUTE BOOKS, SEAL

## M. BURR KEIM COMPANY

2021 ARCH STREET
PHILADELPHIA, PA 19103-1491
(215) 563-8113
(FAX) (215) 977-9386
1-800-533-8113

June 24, 2005

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

RE: WINDMOOR HEALTHCARE OF MIAMI, INC. #F97000006265

Ladies/Gentlemen:

We enclose a corporation reinstatement form for the above and our check for \$1,208.75.

Also enclosed are duplicate copies of an Application for Certificate of Withdrawal and our check in the amount of \$50.00 to cover the filing fee.

Please reinstate and file the application for withdrawal and call us at 888 977 8986, extension 225 if you have any questions regarding this request.

Very truly yours,

M. BURR KEIM COMPANY

Robert Worthington

RW:pgm Enclosure

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

| WINDMOOR HEALTHCARE OF MIAMI, INC.  | F. 2 & T.                      |
|---|--------------------------------|
| (Name of Corporation)   | 27                             |
| F9700006265   | 열의 골 다                         |
| (Document Number of Corporation (if known)  | 2.19                           |
| DELAWARE  |                                |
| (Incorporated Under Laws of)  |                                |
| voluntarily surrenders its authority to transact business or conduct affairs in Florida.  This corporation revokes the authority of its registered agent in Florida to acceptoints the Department of State as its agent for service of process based on a cast time it was authorized to transact business or conduct affairs in Florida. | cept service on its behalf and |
| The following is a current mailing address for the corporation:   |                                |
| ONE VETERANS SQUARE, SUITE 106  |                                |
| (Mailing Address)   |                                |
| MEDIA, PA 19063   |                                |
| (City/ State /Zip)  |                                |
| The corporation agrees to notify the Department of State in the future of any change of the Court appointed fiduciary, by that fiduciary)   | ge in its mailing address.     |
| C W BRETT PRESIDEN (Typed or printed name of person signing) (Ti  | VT<br>tle of person signing)   |

**FILING FEE \$35**