

M0800000294

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

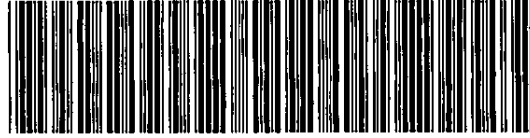
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100287349361

06/28/16--01028--015 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2016 JUN 28 A 10:50

FILED

S Warren

JUN 29 2016

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CARETENDERS MOBILE MEDICAL SERVICES, LLC

(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TODD LYLES

(Name of Person)

ALMOST FAMILY, INC.

(Firm/Company)

9510 ORMSBY STATION ROAD, SUITE 300

(Address)

LOUISVILLE, KY 40223

(City/State and Zip Code)

For further information concerning this matter, please call:

ADRIENNE RILEY at 502 891-1014

(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

CARETENDERS MOBILE MEDICAL SERVICES, LLC

(Name of limited liability company)

OHIO

(Jurisdiction of its organization)

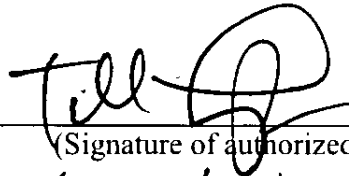
01/17/2008

(Date registered with Florida Department of State)

M08000000294

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Todd Lyles

(Typed or printed name of signee)

SM Vice President

Filing Fee: \$25.00

2008 JAN 28 AM 10:50
SECRETARY OF STATE
DEPARTMENT OF STATE
FLORIDA

FILED