

CT CORPORATION

A30173

(2)

CORPORATION(S) NAME

A30173

7/11

LP Cancel

MJH

HEALTHSOUTH Rehabilitation Center of Palm Beach, Ltd.

RECEIVED
FILED
02 JUL 11 AM 11:19
TALLAHASSEE FLORIDA

- | | | |
|--|--|---|
| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> Nonprofit | | |
| <input type="checkbox"/> Foreign | <input checked="" type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| | <input type="checkbox"/> Reinstatement | |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other |
| <input type="checkbox"/> LLC | <input type="checkbox"/> Name Registration | <input type="checkbox"/> Change of RA |
| | <input type="checkbox"/> Fictitious Name | <input type="checkbox"/> UCC |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photocopies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call If Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | <input type="checkbox"/> Will Wait | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

7/11/02

Order#: 5451070

700006329957-15

-07/11/02--01039--003

Ref#: *****735.00 *****52.50

Amount: \$ _____

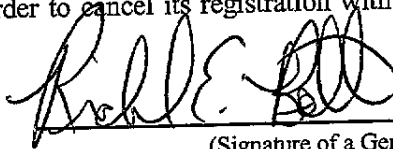
660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**CERTIFICATE OF CANCELLATION
FOR**

Healthsouth Rehabilitation Center of Palm Beach, Ltd.

(insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.174, Florida Statutes, this foreign limited partnership hereby submits this certificate of cancellation in order to cancel its registration with the Florida Department of State.



(Signature of a General Partner)

Richard E. Botts, V.P. of the General Partner


(Typed or Printed name of General Partner Signing Above)

STATE OF ALABAMA

COUNTY OF JEFFERSON

On this 28th day of June, 2002, Richard E. Botts
personally appeared before me,

- ☒ who is personally known to me
☐ whose identity I proved on the basis of _____



Notary Public Signature

Cynthia F. Sandford

Notary's Printed Name

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 JUL 11 PM 3:24

FILED

Seal

My Commission Expires: 2/18/06