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TO:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

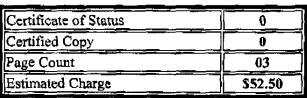
Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

## DISS/TERM/CANCEL/REV OF LP/LLP HEALTHSOUTH OF LARGO LIMITED PARTNERSHIP



Electronic Filing Menu

Corporate Filing Menu

Help

J. BRYAN

JUN -1 2012

2609889998

https://efile.sunbiz.org/scripts/efilcovr.exe

CT CORPORATION

## COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: HEALTHSOUTH of Largo Limited Partnership (Name of Poreign Limited Partnership or Limited Liability Limited Partnership) The enclosed Notice of Cancellation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Andrew Schilder (Contact Person) HealthSouth Corporation (Firm/Company) 3660 Grandview Parkway, Sulte 200 (Address) Birmingham, AL 35243 (City, State and Zip Code) For further information concerning this matter, please call: **Andrew Schilder** <sub>1</sub>970-7846 (Name of Contact Person) (Area Code and Daytimo Telephone Number) Enclosed is a check for the following amount: S52.50 Filing Fee S105,00 Filing Fee S61,25 Filling Pro S113.75 Filing Fee, and Certificate of and Certified Copy Cartified Copy, and Certificate of Status STREET ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P. O. Box 6327

Tallahassee, FL 32314

02/31/5015 12:18 8666336092

2661 Executive Center Circle

Tallahassee, FL 32301

## NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

## **HEALTHSOUTH of Largo Limited Partnership**

(Name of limited partnership or limited liability limited partnership)

A	la	h	я	m	2
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(Jurisdiction of formation)

December 30, 1994

(Date authorized to transact business in Florida)

This foreign limited partnership or limited liability limited partnership is no longer transacting business in Florida and wishes to cancel its certificate of authority pursuant to s. 620.1907, F.S.

This entity appoints the Florida Department of State as its agent for service of process for rights of action arising out of the transaction of business in this state.

Effective date, if other than the date of filing: 5/31/2012
(Effective date connot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:

Typed or printed name:

John P. Whittington

Filing Fee:

552.50

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

40 M

Z609EE9598 81:51 Z10Z/IE/90

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CT CORPORATION