| (Re                     | questor's Name)   |             |
|-------------------------|-------------------|-------------|
|                         |                   | ,           |
| (Ad                     | dress)            |             |
|                         |                   |             |
| (Ad                     | dress)            |             |
|                         |                   |             |
| (Cit                    | y/State/Zip/Phone | ∋#)         |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (5).                    | -i Carita Ni      |             |
| (Bu                     | siness Entity Nan | ne)         |
| · (Do                   | cument Number)    |             |
| , (50                   | cument Number)    |             |
| Certified Copies        | Certificates      | of Status   |
| •                       | -                 | <del></del> |
| Special Instructions to | Filing Officer:   |             |
|                         |                   |             |
|                         |                   |             |
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## CCH LEGAL INFORMATION SERVICES

July 3, 2006

111 Eighth Avenue New York, NY 10011

RE: ORTHOREHAB, INC. (DE. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is \_\_1\_ checks in the amount of \$35.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure RPP July 3, 2006

RE: ORTHOREHAB, INC. (DE. DOM.)

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri (hm)

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA/hm Enclosure RPP

# RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the provisions of sections 60                           | 7.0502(2), 617.0502(2), 607.1509, or 617       | .1509,          |
|---|--|-----------------|
| Florida Statutes, the undersigned,                                  | C T CORPORATION SYSTEM                         |                 |
| Tiorida Satutos, tilo dilaorsignoa,                                 | (Name of Registered Agent)                     |                 |
|   | ORTHOREHAB, INC. (DE. DOM.)                    |                 |
| hereby resigns as Registered Agent for                              | (Name of Corporation)                          |                 |
| F01000003385  |  |                 |
| (Document Number, if known)   | _  |                 |
| A copy of this resignation was mailed to                            | the above listed corporation at its last known | own address.    |
| The agency is terminated and the office of this statement is filed. | discontinued on the 31st day after the date    | on which        |
| (Sig  | nature of Resigning Agent)                     |                 |
| If signing on behalf of an entity:                                  |  | O6 JUL<br>SECRE |
| C T CORPORATI   | ION SYSTEM - THERESA ALFIERI                   | -7              |
| T)  | yped or Printed Name)                          |                 |
| ASS   | ISTANT SECRETARY                               | 10: 36 FLORIDA  |
|   | (Capacity)                                     | _               |

# Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314