## FOIDDOOD 6601 TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: GC Services, Thc.	
	corporation)
DOCUMENT NUMBER: F01000006601	
The enclosed withdrawal application and fee a	re submitted for filing.
Please return all correspondence concerning this matter to the following:	
Wynn Sims	
(Name of Person)	5000060368359
Mariner Health Care, Inc.	-06/26/0201025009 *****35.00 *****35.00
(Firm/Company)	* ************************************
One Ravinia Drive, Suite 1500	
(Address)	•
Atlanta, GA 30346	
(City/State and Zip code)	
For further information concerning this matter, p	olease call:  ARETARY OF THE SEE THE S
Wynn Sims	at ( 678 ) 443 - 6775
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines St. Tallahassee, FL. 32399	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314
	$\sim$ $\sim$ $\sim$ $\sim$

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

	JOBA Mariner ESC, Inc.	
(Name of Co	orporation)	
California		
(Incorporated U	Under Laws Of)	
and hereby voluntarily surrenders its authority to	es or conducting affairs within the State of Florida transact business or conduct affairs in Florida. gistered agent in Florida to accept service on its	
	ts agent for service of process based on a cause of	
action arising during the time it was authorized to	o transact business of conduct ariairs in ronde	
The following is a current mailing address for the		Company of the last of the las
One Ravinia Drive, Suite 1500	ARY OF SSEE,	
	Address) FLORIDA	Ö
Atlanta, GA 30346	tate /Zip)	
, ,	of State in the future of any change in its mailing	
Signature of the chairman or vice chairman of the boar president, or any officer, or if the corporation is in the receiver, trustee, or other court-appointed fiduciary, by	hands of a	
Wynn Sims	June 21, 2002	
Typed or printed name	Date	• •