

FO20000003197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

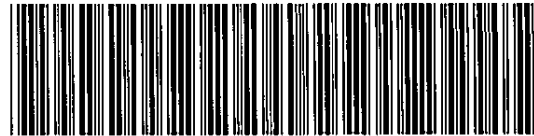
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 APR -9 PM 1:51

DIVISION OF CORPORATIONS

FILED

15 APR -9 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WID

APR 10 2015

R. WHITE

ACCOUNT NO. : I20000000195

REFERENCE : 582655 5051662

AUTHORIZATION :

COST LIMIT : \$35.00

ORDER DATE : April 9, 2015

ORDER TIME : 10:39 AM

ORDER NO. : 582655-015

CUSTOMER NO: 5051662

FOREIGN FILINGS

NAME: CRA HEALTH SERVICES, INC.

☒ CORPORATE
☐ LIMITED PARTNERSHIP
☐ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CRA Health Services, Inc.

(Name of Corporation)

DOCUMENT NUMBER: F02000003197

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this
matter to the following:

Barbara Greinke

(Name of Person)

CRA Health Services, Inc.

(Firm/Company)

8580 Cinderbed Road, Suite 2400

(Address)

Newington, VA 22122

(City/State and Zip code)

For further information concerning this matter, please call:

Barbara Greinke

(Name of Person)

at (703) 541-4570

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL.32314

STREET ADDRESS:

Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL. 32301

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

CRA Health Services, Inc.

(Name of Corporation)

F02000003197

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

8580 Cinderbed Road, Suite 2400

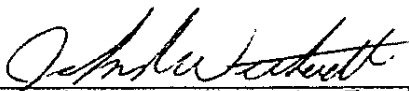
(Mailing Address)

Newington, VA 22122

(City/ State /Zip)

FILED
15 APR -9 AM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The corporation agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

John R. Wetherell

(Typed or printed name of person signing)

4/8/15

(Date)

CFO/Assis. Secretary

(Title of person signing)

FILING FEE \$35