

FD2000006438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

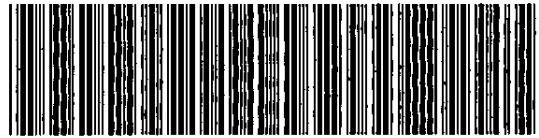
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 MAY 18 AM 10:24

Withdrawal  
CUS  
@ 5/19/10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** NATIONAL SPEAKING OF WOMEN'S HEALTH FOUNDATION  
(Name of Corporation)

**DOCUMENT NUMBER:** F 02000006438

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this  
matter to the following:

DEE SNAFFER  
(Name of Person)

NATIONAL SPEAKING OF WOMEN'S HEALTH FOUNDATION  
(Firm/Company)

625 EDEN PARK DRIVE, SUITE 200  
(Address)

CINCINNATI, OHIO 45202  
(City/State and Zip code)

For further information concerning this matter, please call:

DEE SNAFFER at (513) 419-6542  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

NATIONAL SPEAKING OF WOMEN'S HEALTH FOUNDATION INC.  
(Name of Corporation)

F020000006438  
(Document Number of Corporation (if known))

OHIO  
(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.

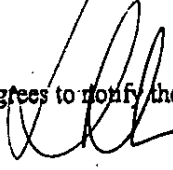
The following is a current mailing address for the corporation:

625 EDEN PARK DRIVE SUITE 200  
(Mailing Address)

CINCINNATI, OHIO 45202  
(City/State/Zip)

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TALLAHASSEE, FLORIDA  
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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)

May 14-10  
(Date)

DIANNE DUNKELMAN  
(Typed or printed name of person signing)

PRESIDENT & CEO  
(Title of person signing)

FILING FEE \$35