Florida Department of State

Division of Corporations Public Access System

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CORPDIRECT AGENTS, INC. Account Name

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DISSOLUTION OR WITHDRAWAL

SOVEREIGN HEALTHCARE, INC.

| Certificate of Status | 0 |
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X J J J W

6/3/2008 t0:24 AM

From: Ricky Soto

Tuesday,/June 03, 2008 11:11 AM Page: 2 of 2

H08000143325 3

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

| SOVEREIGN HEALTHCARE, INC. | | | |
|--|------------------|---------------|----|
| (Name of Corporation) | - | | |
| F03000003524 | | | |
| (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 voluntarily surrenders its authority to transact business or conduct affairs in Florida. | and her | eby | |
| This corporation revokes the authority of its registered agent in Florida to accept service on its appoints the Department of State as its agent for service of process based on a cause of action arising | behalf during | and the | |
| time it was authorized to transact business or conduct affairs in Florida. | Eu | 9 | ٠ |
| The following is a current mailing address for the corporation: | L AK | | 70 |
| 5887 GLENRIDGE DRIVE, SUITE 150 | ASS | 3 | _ |
| (Mailing Address) | EF.O | PH | |
| ATLANTA, GA 30328 | FS. | က္ | |
| (City/ State/Zip) | NO. | 35 | |
| The corporation agrees to notify the Department of State in the future of any change in its mailing ac | idress. | | |
| (Signature of a director, president or other leftices — If in the hands of a receiver or other court appointed fiduciary, by that fiduciary) | ATT-1-1,-1 | - | |
| (Typed or printed name of person signing) (Fo (Title of person signing) | | - | |

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