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COVER LETTER

A B 4 B 1 O 1 CC	
SUBJECT: AMN Staffing	
	(Name of Corporation)
DOCUMENT NUMBER: <u></u>	04000002127
The enclosed withdrawal app	lication and fee are submitted for filing.
Please return all correspondent matter to the following:	ce concerning this
Ann Stipica	
	(Name of Person)
AMN Healthcare	e, Inc.
	(Firm/Company)
12400 High Bluf	f Dr.,Ste.100; Attn:Legal
	(Address)
San Diego, CA 9	92130
	(City/State and Zip code)
For further information concer	ning this matter, please call:
Ann Stipica	at (858) 314-7443
(Name of Perso	

MAILING ADDRESS:

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

STREET 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

(Name of Corporation)

AMN Staffing Services, Inc.

F0400002127	AHA.
(Document Number of Corporation (if	known)
(Document Number of Corporation (in t	known)
Delaware	
(Incorporated Under Laws of)	
(······ p - · · · · · · · · · · · · · · ·	
This corporation is no longer transacting business or conducting affa voluntarily surrenders its authority to transact business or conduct affa	airs in Florida.
This corporation revokes the authority of its registered agent in Flappoints the Department of State as its agent for service of process battime it was authorized to transact business or conduct affairs in Florid	sed on a cause of action arising during the
The following is a current mailing address for the corporation:	
12400 High Bluff Dr. Ste. 100 (Mailing Address)	
San Diego, CA 92130	
(City/ State /Zip) The corporation agrees to notify the Department of State in the future (Signature of a director, president or other officer. In the hands of a	of any change in its mailing address.
Denise L. Jackson (Typed or printed name of person signing)	SVP, General Counsel & Secretary (Title of person signing)

FILING FEE \$35