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ILLINOIS KANSAS MISSOURI NEVADA SHANGHAI WASHINGTON, DC

ATTORNEYS AT LAW

January 7, 2009

Renee Luke National Registered Agents, Inc. 2 Club Centre Ct. Suite 5 Edwardsville, IL 62025

> Re: MediCredit Financial Services, Inc.

Dear Renee:

Enclosed please find an Application for Withdrawal on behalf of the above referenced company. Please advance the appropriate filing fees and file the document upon receipt with the Florida Secretary of State.

Once the application has been filed please return the evidence to my attention via pdf email followed by regular mail. If you have any questions regarding the enclosed filing please feel free to contact me.

Yours truly,

Legal Assistant

SPK

Enclosures

Mark Stoneman cc:

ONE METROPOLITAN SQUARE

COVER LETTER

7	FO: Amendment Section Division of Corporations
5	SUBJECT: MediCredit Financial Services, Inc.
	(Name of Corporation)
]	DOCUMENT NUMBER: F04000004677
7	The enclosed withdrawal application and fee are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	Roner Luke
	National (Sporate Services
	(Firm/Company)
	(Address)
	Bloomfield Alls MI 48300 (City/State and Zip code)
F	For further information concerning this matter, please call:
•	Shannon Kister at (314) 621-5070
	(Name of Person) (Area Code & Daytime Telephone Number)

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

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, , !		r, president or other officer t appointed fiduciary, by t			(Date)		
•	receiver of ourer cour	i appointed fiduciary, by t	in indiciary)				
•	Mark Row	land	:	Secretar	v		
		ted name of person signing	g) ;		of person signing)		

FILING FEE \$35