

FD5000000739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

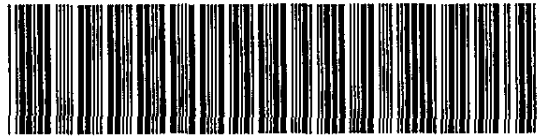
(Business Entity Name)

(Document Number)

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06 MAR - 8 AM 9:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Withdrawal
S.L.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HEALTHCARE SPECIALIST, Inc of Broward County
(Name of Corporation)

DOCUMENT NUMBER: F05000000739

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

Please return all correspondence concerning this
matter to the following:

Anthony CHIOFALO JR.
(Name of Person)

HEALTHCARE SPECIALIST, Inc of Broward
(Firm/Company)

2707 QUENTIN AVE SE
(Address)

Palm Bay, FL 32909
(City/State and Zip code)

For further information concerning this matter, please call:

Anthony CHIOFALO JR. at (321) 725-4640
(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

06 APR -3 AM 8:00
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 20, 2006

Anthony Chiofolo Jr.
2707 Quentin Avenue, S.E.
Palm Bay, FL 32909

SUBJECT: HEALTHCARE SPECIALISTS INC. OF BROWARD COUNTY
Ref. Number: F05000000739

We have received your document for HEALTHCARE SPECIALISTS INC. OF BROWARD COUNTY and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Dissolution to dissolve a Florida domestic corporation have been submitted in error. A withdrawal application must be filed to withdraw the authority of a foreign corporation in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert
Document Specialist

Letter Number: 806A00018811

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

HEALTH CARE SPECIALISTS, INC. OF Broward County
(Name of Corporation)

FD5000000739
(Document Number of Corporation (if known))

NEVADA
(Incorporated Under Laws of)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

2707 Quentin AVE SE
(Mailing Address)

Palm Bay, FL 32909
(City/State/Zip)

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

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

3-30-06
(Date)

Anthony CHIOLD, JR.
(Typed or printed name of person signing)

P/V P/S/T
(Title of person signing)

FILING FEE \$35