F060000004643

(Re	questor's Name)	,
(Ād	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
v		·

Office Use Only



600150865276

04/20/09--01020--013 **35.00

PILED

2009 APR 20 PH I2: 34

SECRETARY OF STATE
AHASSEF, FI ORIGINAL

withdrawal
TB 421-09

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Medical Alliance Staffing, Inc. (Name of Corporation)
DOCUMENT NUMBER: F0600004643
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Sally B. Haynes (Name of Person)
Medical Alliance Staffing, Inc.
(Firm/Company)
(Address)
Columbia, S.C. 29239 (City/State and Zip code)
For further information concerning this matter, please call:
Sally B. Hayres at (954) 258 · 1064 (Name of Person) (Area Code & Daytime Telephone Number)
MAII INC ADDDESS. STDEFT ADDDESS.

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

Medical Alliance Statting, Inc.
F06000004643 (Document Number of Corporation (if known)
Deloware (Incorporated Under Laws of)
(incorporated Order Laws 61)
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:
427 Marsh Pointe Drive (Mailing Address)
Columbia, S.C. 29229 (City/State/Zip)
(City) State (Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of a director, president of other afficer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
Sally B. Haynes President (Typed & printed name of person signing) (Title of person signing)

FILING FEE \$35