F06000007781

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nar	me)			
(Do	cument Number)				
Certified Copies	_ Certificates	s of Status			
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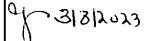
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COVER LETTER

	nendment Section vision of Corporations		
SUBJECT	In-Motion Rehab, Inc.		
		(Name of Corporation)	
DOCUME	ENT NUMBER: F06000007781		
The enclos	sed withdrawal application and	fee are submitted for filin	g.
Please retu	nrn all correspondence concerning	g this matter to the follow:	ing:
Ţ	amara I. Trimble		
		(Name of Person)	
Α	dventHealth		
_		(Firm/Company)	
9	00 Hope Way		
_		(Address)	
Α	Itamonte Springs, FL 32714		
-	((City/State and Zip code)	
For further	r information concerning this ma	tter, please call:	
TL Trimble		at ()	0966
	(Name of Person)	(Area Code o	& Daytime Telephone Number)
Enclosed i	s a check for the amount:		
	ing Fee ☐ \$43.75 Filing Fee & Certificate of Status		☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
An Di P.C	iling Address: mendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Street Address: Amendment Section of Corp. The Centre of Tallaharana, El	oorations allahassee Street, Suite 810

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

In-Motion Rehab, Inc.

	(Name of Corpora	ntion)		3
	(Name or Corpora	1007117	718 118	১ চ শনুম}
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196000007781				ر ان
	(Document Number of Corpor	ration (if known)	673	
Kansas	12/13/2006			
(Incorporated Under	Laws of and date authorized to t	ransact business/conduct its	affairs)	
This corporation is no longer tranvoluntarily surrenders its authority			nte of Florida	and hereby
This corporation revokes the autappoints the Department of State time it was authorized to transact	as its agent for service of pro	ocess based on a cause of		
The following is a current mailing	g address for the corporation	:		
900 Hope Way				
	(Mailing Addres	ss)		_
Altamonte Springs, FL 327	14			
	(City/ State /Zip	p)		_
The corporation agrees to notify t	the Department of State in th	ne future of any change in	rits mailing a	ddress.
14108	S., L _	12/19/2022		
(Signature of a director, president receiver or other court appointed	or other officer - if in the hands of a fiduciary, by that fiduciary)	- (l	Date)	
Mike Saunders		Assistant Secretary		
(Typed or printed name of	f person signing)	(Title of	person signing)	