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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023
Phone : (614)280-3338

Fax Number : (954)208-0845

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REGISTERED AGENT RESIGNATION AID & ASSIST AT HOME, INC.

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, |
|--|
| Florida Statutes, the undersigned, CTCORPORATION SYSTEM (Name of Registered Agent) |
| hereby resigns as Registered Agent for AID & ASSIST AT HOME, INC. (Name of Corporation) |
| 000003378 |
| |
| (Document Number, if known) |
| A copy of this resignation was mailed to the above listed corporation at its last known address. |
| The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. |
| (Signature Resigning Admit) |
| If signing on behalf of an entity: |
| Kimberly Laughrey |
| (Typed or Printed Name) |
| ASSISTANT SECRETARY |
| (Capacity) |
| Fee for filing this document: S87.50 - Active Corporation S35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation |

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314