# F0900001453

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	ə #)
PICK-UP	WAIT	MAIL
(B	usiness Entity Nan	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
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Withdrawal

TO ACKNOWLEDGE SUFFICIENCY OF FILIT RECEIVED

DEPARIMENT OF STATE

DIVISION OF CORPORATION

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SECRETARY OF STAT

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AČCOUNT NO. : I2000000195 REFERENCE: 853332 5124708 AUTHORIZATION \$ 35.00 COST LIMIT U: ORDER DATE : July 21, 2011 ORDER TIME: 9:49 AM ORDER NO. : 853332-025 CUSTOMER NO: 5124708 FOREIGN FILINGS NAME: CONTINUING CARE RX, INC. XX CORPORATE \_\_\_\_ LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY \_\_\_\_ CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Troy Todd - EXT# 2940

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: Continuing Care Rx, Inc.  (Name of Corporation)				
The enclosed withdrawal application and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Diane Burns				
(Name of Person)				
Omnicare, Inc. Legal Department				
(Firm/Company)				
100 E. RiverCenter Blvd. Suite 1600				
(Address)				
Covington, KY 41011				
(City/State and Zip code)				
For further information concerning this matter, please call:				
Cecilia Temple at ( 859 ) 392-9017				
(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

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

	Continuing Care Rx, Inc.	
	(Name of Corporation)	TALL SEC
	F0900001453	留上
	(Document Number of Corporation (if known)	SSEE.
	Pennsylvania	FLOST :
	(Incorporated Under Laws of)	A POLICE
	poration is no longer transacting business or conducting affairs within surrenders its authority to transact business or conduct affairs in Fl	
appoints	rporation revokes the authority of its registered agent in Florida to a the Department of State as its agent for service of process based on a was authorized to transact business or conduct affairs in Florida.	
The follo	owing is a current mailing address for the corporation:	
	100 E. RiverCenter Blvd. Suite 1600	
	(Mailing Address)	<del></del>
	Covington, KY 41011	
	(City/ State /Zip)	
The corp	poration agrees to notify the Department of State in the future of any c	hange in its mailing address.
	Smith	7-20-11
<u>(5</u>	Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
_	Regis Robbins 5 lec.	Secretary

**FILING FEE \$35**