F0900001992

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
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08/16/13--01031--014 **43.75







August 13, 2013

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Mission Strategies, Inc.

Dear Sir/Madam:

Please find enclosed an original and one copy of the Application by Foreign Corporation for Withdrawal together with our check in the amount of \$43.75.

We understand you will return a certified copy of the recorded document to our attention.

Sincerely

T.L. Trimble

Vice President & Regional CLO

Legal Services

TLT/dt

Enclosures

X:\Legal\DIVISION-NURSING HOMES\SHCC Dba ACC\SERVICE ORGANIZATIONS\Mission Strategies of GA, Inc\General\Ltr_DOC-FL_Appwithdrwl.Doc

900 Hope Way | Altamonte Springs, Florida 32714 | 407-357-1000

COVER LETTER

TO: Amendment Section Division of Corporations	
Missian Stratogica Inc	
SUBJECT: WISSION Strategies, Inc. (Name of Corp.)	oration)
DOCUMENT NUMBER: F0900001992	
The enclosed withdrawal application and fee are submitted	l for filing.
Please return all correspondence concerning this matter to the following:	
Tamara L. Trimble	
(Name of Perso	on)
Adventist Health System	
(Firm/Compan	ny)
900 Hope Way	
(Address)	
Altamonte Springs, FL 32714	
(City/State and Zip	o code)
For further information concerning this matter, please call:	
	₎ 357-2304
	ea Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee \$ \$43.75 Filing Certificate of Status Certified Copy (Additional control Enclosed)	Certificate of Status & Certified
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	2661 Executive Center Circle

Tallahassee, FL.32314

Tallahassee, FL. 32301

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

Mission Strategies, Inc.

(Name of Corporation)	
F0900001992	
(Document Number of Corporation (i	f known)
Kansas	
(Incorporated Under Laws of	
This corporation is no longer transacting business or conducting af voluntarily surrenders its authority to transact business or conduct at	•
This corporation revokes the authority of its registered agent in F appoints the Department of State as its agent for service of process the time it was authorized to transact business or conduct affairs in I	s based on a cause of action arising during
The following is a current mailing address for the corporation:	7
900 Hope Way	2013 A
(Mailing Address)	188/E
Altamonte Springs, FL 32714 (City/ State /Zip)	
	08
The corporation agrees to notify the Department of State in the future	re of any change in its mailing address.
(Signature of a director president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	August 13, 2013 (Date)
(Typed or printed name of person signing)	Asst. Secretary (Title of person signing)