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RE-SUBMIT

From:

Account Name

C T CORPORATION SYSTEM POLICY CINCIPAL STORY

Account Number: FCA000000023

: (850)222-1092

Phone : (850)878-5368 Fax Number

date of submission 2/20

DISSOLUTION OR WITHDRAWAL AMERICAN ASSOCIATION OF PROFESSIONAL DRIVERS (INC.)

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COVER LETTER

TO:		dment Section on of Corporations	•	
SUBJ	ECT:	AMERICAN ASSOCIATION OF F		
			(Name of Corporation)
DOC	UMEN	T NUMBER: <u>F09000002263</u>		
The e	nclosed	withdrawal application and	fee are submitted for fi	ling.
		all correspondence concerning following:	; this	
	Ranc	li Haluptzok		
			(Name of Person)	
	Hom	eland Healthcare	_	
	_		(Firm/Company)	
	825 1	Market Street, Suite 300		
			(Address)	
	Alle	n, TX 75013		
		(0	City/State and Zip code	
For fi	uther in	formation concerning this mat	ter, please cali:	
Randi	Heluptze			24-5213
Enclo	sed is a	(Name of Person) check for the amount;	(Arca Cod	e & Daytime Telephone Number)
⊠ \$3	5 Filing	Fee \$\int\\$43.75 \text{ Filing Fee & Certificate of Status}\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	☐\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
		MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314	·	STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301

850-**817-638**1

272172014 10:52:10 AM PAGE 1/001 Fax Server



February 21, 2014

FLORIDA DEPARTMENT OF STATE

AMERICAN ASSOCIATION OF PROFESSIONAL DRIVERS (INC.)
101 E. PARK BOULEVARD
SUITE 600
PLANO, TX 75074

SUBJECT: AMERICAN ASSOCIATION OF PROFESSIONAL DRIVERS (INC.)

REF: F09000002263

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter Regulatory Specialist FAX Aud. #: H14000042326 Letter Number: 514A00003920

HEBSI MIIII

RE-SUBMIT
Please retain adoled filing daie of submission _2/20



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

AMERICAN ASSOCIATION OF PROFESSIONAL DRIVERS (INC.)

	F09000002263
	(Document Number of Corporation (if known)
	Illinois
	(Incorporated Under Laws of)
	poration is no longer transacting business or conducting affairs within the State of Florida and I ly surrenders its authority to transact business or conduct affairs in Florida.
ts	poration revokes the authority of its registered agent in Florida to accept service on its behathe Department of State as its agent for service of process based on a cause of action arising it was authorized to transact business or conduct affairs in Florida.
11	owing is a current mailing address for the corporation:
	101 E. Park Blvd. Suite 600
	101 E. Park Blvd. Suite 600 (Mailing Address)
	101 E. Park Blvd. Suito 600
.,,	101 E. Park Blvd. Suite 600 (Mailing Address) Plano, TX 75074
	101 E. Park Blvd. Suite 600 (Mailing Address) Plano, TX 75074
	101 E. Park Blvd. Suite 600 (Mailing Address) Plano, TX 75074 (City/ State /Zip)
rp	Plano, TX 75074 (City/ State /Zip) coration agrees to notify the Department of State in the future of any change in its mailing address [Plano, TX 75074 (City/ State /Zip) [Plano, TX 75074 (City/ State /Zip)
rp 7	Plano, TX 75074 (City/ State /Zip) coration agrees to notify the Department of State in the future of any change in its mailing address
rp Č	Plano, TX 75074 (City/ State /Zip) coration agrees to notify the Department of State in the future of any change in its mailing address [Plano, TX 75074 (City/ State /Zip) [Plano, TX 75074 (City/ State /Zip)