F10000001290

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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19/14

COVER LETTER

TO: Amondment Souther	
TO: Amendment Section Division of Corporations	
SUBJECT: HELP SERVICES, I	NC.
	ame of Corporation)
E4000001	•
DOCUMENT NUMBER: F 10000001	200
The enclosed withdrawal application and fee a	are submitted for filing.
Please return all correspondence concerning this matter to the following:	
JAMES V. CHIN	
(N	ame of Person)
MEDICAL SERVICES	OF AMERICA, INC
(F	irm/Company)
PO BOX 2431	
	(Address)
LEXINGTON, SC 2907	71-2431
(City/S	State and Zip code)
For further information concerning this matter, p	alease call
TIFFANY GREEN	803 \ \ 957 0500 \ X6705
	(Area Code & Daytime Telephone Number)
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
	[·····]
Certificate of Status C	43.75 Filing Fee & \$\ \ \\$52.50 Filing Fee, ertified Copy
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	2661 Executive Center Circle

Tallahassee, FL. 32301

Tallahassee, FL.32314

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

HELP SERVICES, INC.

(Name of Corporation)		
F1000001290		52
(Document Number of Corporation (i	f known)	7
SOUTH CAROLINA	ASS.	FILE
(Incorporated Under Laws of) jud	
	C P	ယ္
This corporation is no longer transacting business or conducting af voluntarily surrenders its authority to transact business or conduct a	fairs within the State of F ffairs in Florida.	lorida and hereby
This corporation revokes the authority of its registered agent in I appoints the Department of State as its agent for service of process the time it was authorized to transact business or conduct affairs in	s based on a cause of act	on its behalf and ion arising during
The following is a current mailing address for the corporation:		
POST OFFICE BOX 2431		
(Mailing Address)		
LEXINGTON, SC 29071-2431		
(City/ State /Zip)		<u>-</u>
The corporation agrees to notify the Department of State in the future.	re of any change in its ma	iling address.
	06 / 10 /201	4
(Signature of a director, president or other officer. It in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)	
JOHN D. KEIM	VP / SECY &	
(Typed or printed name of person signing)	(Title of person s	igning)