

F16000001478



900395060859

Withdrawal

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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A. RAMSEY
OCT - 3 2022

①

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 09/30/2022

Acc#I20160000072

Eric DW

Name:	Advanced Homecare Management, Inc.
Document #:	
Order #:	14558150

Certified Copy of Arts & Amend:	<input type="checkbox"/>	<i>Please file the withdrawal first, followed by the Qualification, Thank you!</i>	
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
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Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Ref# _____

Amount: \$ **43.75**

Thank you!

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

Advanced Homecare Management, Inc.

(Name of Corporation)

F16000001478

(Document Number of Corporation (if known))

Delaware 03/29/2016

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

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2022 SEP 30 AM 11:01
TALLAHASSEE, FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

6688 N. Central Expressway, Suite 1300

(Mailing Address)

Dallas, TX 75206

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

/s/ Chad K. Knight

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

9/9/2022

(Date)

Chad Knight

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILING FEE \$35