F1600000 4690

(Re	questor's Name)		
. (Address)			
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(Cit	y/State/Zip/Phone	∍ #)	
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T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations		
_{subject:} Rehabilitation Ins	titute of Ch	icago, Inc.
	(Name of Corpor	
DOCUMENT NUMBER: F160000	04690	
The enclosed withdrawal application and		for filing.
Please return all correspondence concerning matter to the following:	g this	
Nancy E. Paridy		
	(Name of Persor	
Rehabilitation Institu	ute of Chica	ago
Construction	(Firm/Company)
345 East Superior S	Street	
· · · · · · · · · · · · · · · · · · ·	(Address)	
Chicago, IL 60611		
(0	City/State and Zip	code)
For further information concerning this mat	ter, please call:	
Nancy E. Paridy	at (312	,238-6208
(Name of Person) Enclosed is a check for the amount:	(Area	Code & Daytime Telephone Number)
\$35 Filing Fee \$\sum \\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing F Certified Copy (Additional copensions) Enclosed)	Certificate of Status & Certified
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

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

(Name of Corporation) F16000004690 (Document Number of Corporation (if known) Illinois (Incorporated Under Laws of) 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: 345 E. Superior St. (Mailing Address) (City/ State /Zip)	Rehabilitation Institute of Chica	ago, Inc.
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: 345 E. Superior St. (Mailing Address) (City/ State /Zip) (City/ State /Zip) (City/ State /Zip) The corporation agrees to notify the Department of State in the future of any change in its mailing address. (Signature of a director, president or other offlich - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) Nancy E. Paridy Corporate Secretary	(Name of Corporation)	
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(City/ State /Zip) The corporation agrees to notify the Department of State in the future of any change in its mailing address. **Corporate Secretary** (City/ State /Zip) (City/ Stat	(Mailing Address)	AN JAN
The corporation agrees to notify the Department of State in the future of any change in its mailing address. Larry C. Ranich 0//1/2017 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) Nancy E. Paridy Corporate Secretary		SEE.
Nancy E. Paridy O//17/2017 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) Corporate Secretary	(City/ State /Zip)	STAIL S
Nancy E. Paridy Corporate Secretary	The corporation agrees to notify the Department of State in the future	ure 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)	01/17/2017 (Date)
(Typed or printed name of person signing) (Title of person signing)	Nancy E. Paridy (Typed or printed name of person signing)	