

F22000000387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FL

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

O SIMMONS

APR 27 2022

FILE 1ST

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 638549 7175508

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : April 25, 2022

ORDER TIME : 1:49 PM

ORDER NO. : 638549-005

CUSTOMER NO: 7175508

FOREIGN FILINGS

NAME: ^{Supply} REHABTECH CORPORATION

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER: _____

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

REHABTECH SUPPLY CORPORATION

(Name of Corporation)

122000000387

(Document Number of Corporation (if known))

ILLINOIS 01/18/2022

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

SECRETARY OF STATE
TALLAHASSEE, FL

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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:


655 W. GRAND AVE., STE 100

(Mailing Address)

ELMHURST, IL 60126

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

BRIAN M. DACY

(Typed or printed name of person signing)

4/21/2022
(Date)

PRESIDENT

(Title of person signing)

FILING FEE \$35