F95000000934

(Requestor's Name)	
(Address)	
(dates)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Business Effuty Name)	
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Addus HealthCare, Inc.	
(Name of corporation)	
DOCUMENT NUMBER: F95000000934	
The enclosed withdrawal application and fee are submitted for file	ing.
Please return all correspondence concerning this matter to the following:	
Edward Budy, Esq.	
(Name of Person)	
Addus HealthCare, Inc.	
(Firm/Company)	
2401 S. Plum Grove Road	
(Address)	
Palatine, Illinois 60067	
(City/State and Zip code)	·
For further information concerning this matter, please call:	
	303-5300
(Name of Person) (Area Code	e & Daytime Telephone Number)
Amendment Section	MAILING ADDRESS: Amendment Section Division of Corporations

Amendment Section Division of Corporations 409 E. Gaines St. Tailahassee, FL. 32399 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

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

Addus HealthCare, Inc.		
(Name of Corporation)		
F9500000934		
(Document Number of Corporation (if	known)	
Illinois		
(Incorporated Under Laws of)		
This corporation is no longer transacting business or conducting affavoluntarily surrenders its authority to transact business or conduct affa. This corporation revokes the authority of its registered agent in Fl.	airs in Florida.	
appoints the Department of State as its agent for service of process ba time it was authorized to transact business or conduct affairs in Florid	sed on a cause of action arising during	the
The following is a current mailing address for the corporation:	27. EC	
2401 s. Plum Grove Road		
(Mailing Address)	PECRE ARY OF STANDING AND SEEE, FLO	FILEU
Palatine, Illinois 60067	75	
(City/ State /Zip)	TATE ORIDA	
The corporation agrees to notify the Department of State in the future	of any change in its mailing address.	
Colward Sudy	May 20, 2004	
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)	
Edward Budy	Asst. Secretary	
(Typed or printed name of person signing)	(Title of person signing)	

FILING FEE \$35