

Always First in Health Plans

3200 Highland Avenue
Downers Grove, IL 60515-1282
(630) 241-7900



F95000002398

October 27, 2000

Secretary of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

200003446102--8
-10/31/00--01069--004
*****35.00 *****35.00

Re: Primextra, Inc.

Dear Sir or Madam:

Enclosed please find the Application for Certificate of Withdrawal and a check in the amount of \$35.00 for the above-mentioned. Please file the withdrawal upon receipt and forward a stamp filed copy back as evidence. I have attached a self-addressed envelope for your use.

If you have any questions, please contact me at 630-737-5631.

Thank you for your assistance with this matter.

Sincerely,

Patty Cosentino

PC/ms

Enclosure

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 31 PM 4:24

withdrawal

HT

11-2-2000

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

PRIMEXTRA, INC.
(Name of Corporation)

DELAWARE
(Incorporated Under Laws Of)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 31 PM 4:24

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.

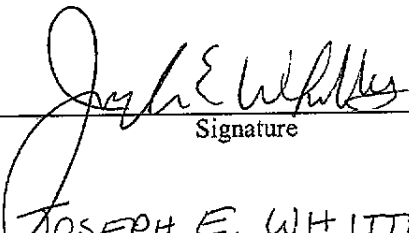
This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

FIRST HEALTH GROUP CORP. ATTN: COMPLIANCE
3200 HIGHLAND (Mailing Address) AVE.

DOWNERS GROVE, IL 60515
(City/ State /Zip)

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

 VICE PRESIDENT
Signature Title
JOSEPH E. WHITTERS 10/10/00
Typed or printed name Date